CITY OF COVENTRY.

Annual Report

. . ON . .

The Health of the City

. . BY . .

E. H. SNELL, M.D., B.Sc. Lond.,

BARRISTER-AT-LAW OF THE MIDDLE TEMPLE.

Diplomate in Public Health of the University of Cambridge; Fellow of the Royal Society of Edinburgh; Fellow, and Member of the Council, of the Royal Institute of Public Health; Past-President of the Midland Branch of the Incorporated Society of Medical Officers of Health; Member of the Royal College of Surgeons, the Epidemiological Society, and the Royal Sanitary Institute.

1904.

Coventry:
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SANITARY COMMITTEE.

Mr. Councillor William Lee, J.P., *Chairman.*
Mr. Alderman J. B. Loudon, J.P., *Vice-Chairman.*
The Mayor (Mr. Alderman A. H. Drinkwater).
Mr. Alderman J. E. Banks, J.P.
Mr. Alderman Webb Fowler, M.B., F.R.C.S., (Ed.), J.P.
Mr. Alderman J. Marriott, J.P.
Mr. Alderman J. Maycock, J.P.
Mr. Alderman C. West.
Mr. Councillor J. T. Armishaw.
Mr. Councillor J. Bausor.
Mr. Councillor E. Colledge.
Mr. Councillor W. Hewitt.
Mr. Councillor W. S. Loudon.
Mr. Councillor J. Slaughter.
Mr. Councillor F. Snape.
Mr. Councillor J. Thomson.

TUESDAY—FIXED MEETINGS.

10 Jan., 1904.
24 Jan.
7 Feb.
21 Feb.
7 Mar.
21 March.
18 April.
2 May.
16 May.
30 May.
27 June.
11 July.
25 July.
22 Aug.
5 Sept.
19 Sept.
3 Oct.
17 Oct.

At 12 o'clock noon.

SANITARY STAFF.

Public Analyst - - -	A. Bostock Hill, M.D., D.P.H.
Veterinary Inspector - -	William Dale, M.R.C.V.S.
Inspector of Nuisances -	W. H. Clarke, Cert. R. San. Inst.
Assistants - - - -	J. Tomlinson, Cert. R. San. Inst.* R. H. Waterman, Cert. R. San. Inst.* J. H. Drury, Cert. R. San. Inst.
Clerk - - - -	G. W. Shelley, Cert. R. San. Inst.
Assistant Clerk - - -	T. C. Wareham.
Supt. of Disinfecting Dept.	Thomas Preedy.
Medical Officer of Health -	E. H. Snell, M.D., D.P.H.

* Also holds Royal Sanitary Institute Certificate as Inspector of Meat, &c.

CITY HOSPITAL SUB-COMMITTEE.

Mr. Councillor W. Lee, J.P., *Chairman.*
Mr. Alderman Loudon, J.P., *Vice-Chairman.*

Mr. Alderman Webb Fowler, M.B., F.R.C.S. (Ed.), J.P.
Mr. Councillor J. T. Armishaw.
,, ,, J. Bausor.
Mr. Councillor W. Hewitt.
,, ,, J. Slaughter.
,, ,, J. Thomson.

FIXED MEETINGS—EVERY FOURTH MONDAY.

Being in each case the day preceding a meeting of the Sanitary Committee.

At 3 p.m., at the City Hospital.

CITY HOSPITAL OFFICERS.

Matron - - - - - - Miss M. Davidson.
Medical Superintendent - - E. H. Snell, m.d.

EXECUTIVE SUB-COMMITTEE.

(Under the Diseases of Animals Acts, 1894 and 1896, and Orders of Board of Agriculture thereunder.)

Mr. Alderman Banks, J.P.
,, ,, West.
,, Councillor Bausor.
,, ,, Colledge.
Mr. Councillor Lee, J.P.
,, ,, Loudon.
,, ,, Snape.

Meetings when necessary.

By the order of the Local Government Board, dated March 23, 1891, Article 18, Section 14, it is prescribed that the Medical Officer of Health shall "make an Annual Report to the "Sanitary Authority, up to the end of December in each "year, comprising a summary of the action taken, or which "he has advised the Sanitary Authority to take, during the "year for preventing the spread of disease, and an account "of the sanitary state of his District generally at the end "of the year. The report shall also contain an account of "the inquiries which he has made as to conditions injurious "to health existing in the District, and of the proceedings "in which he has taken part or advised under any Statute, "so far as such proceedings relate to those conditions; and "also on account of the supervision exercised by him, or on "his advice, for sanitary purposes over places and houses "that the Sanitary Authority have power to regulate, with "the nature and results of any proceedings which may have "been so required and taken in respect of the same during "the year. The report shall also record the action taken by "him, or on his advice during the year, in regard to "offensive trades, to dairies, cow-sheds, and milk shops, "and to factories and workshops. The report shall also "contain tabular statements (on Forms to be supplied by "Us, or to the like effect), of the sickness and mortality "within the District, classified according to diseases, ages, "and localities."

Under Sec. 132 of the "Factory and Workshop Act, 1901," the Medical Officer is also required in his Annual Report to report specifically on the administration of the Factory Act in workshops and workplaces, and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State.

CITY OF COVENTRY.

Thirtieth Annual Report

OF THE

MEDICAL OFFICER OF HEALTH.

To the Right Worshipful the Mayor, Aldermen, and Councillors of the City of Coventry.

Mr. Mayor and Gentlemen,

I have the honour of submitting to you the Thirtieth Annual Report—the eighth that I have presented—concerning the vital statistics and general sanitary condition of your City.

During recent years the proportions of this Report have been growing inordinately; in 1897 it was contained in 40 pages; in 1904 it had expanded to 172 pages. This tendency is noticeable in the Annual Health Reports of most other large towns. It is due to the ever increasing duties and interests of a Health Department. It is easier to yield to this tendency and to record the progress, or want of progress, made in important sanitary matters at length—the length which appears appropriate to them—than to cut down and to summarize in an effective manner. To summarize accurately generally requires more labour and skill than to report fully. And yet it has become clear that some limits must be put to this growing tendency, if for no other reason than that of the brevity of life; the lengthy report may have less chance of receiving attention than the shorter one.

Considerable efforts have therefore been made this year to abbreviate this Report. One step in this direction has been taken by incorporating in the body of the Report the annual statement of the Inspector of Nuisances, referring to matters coming under his immediate supervision; in this way it has been possible to avoid a certain amount of repetition. Other sections have been cut down where there is nothing to add to what has appeared in previous reports. The tables it has not been thought well to reduce; these may be regarded as the most important part of the report from the point of view of their value for future reference.

Summary of Vital Statistics.

The principal features of the vital statistics for the year 1904 have been as follows :—

Estimated population at the middle of the year, 73,904.

Birth Rate, 31.4. Average for previous 10 years, 29.6.

Marriage Rate, 15.6. Average for previous 10 years, 18.0.

Recorded Death Rate, 15.52. Average for previous 10 years, 16.6.

Infantile Death Rate, 137 per 1,000 births. Average for previous 10 years, 148.

Zymotic Death Rate, 1.6. Average for previous 10 years, 2.0.

Respiratory Death Rate (excluding Phthisis) 2.5.

Phthisis Death Rate, 1.05.

Death Rate from other forms of Tuberculosis, .4.

None of the infectious diseases have been abnormally prevalent during the year, except that a larger number of deaths have occurred from Whooping Cough than has been recorded in any one recent year.

Physical Features of the City & District.

My Report for 1903 contained a brief description of the physical features of the district, kindly supplied me by Mr. Alderman Andrews, F.G.S.; that description therefore need not be here repeated.

Population.

In the absence of any better method of estimating the population, this is calculated on the supposition that the increase which took place between the census of 1891 and that of 1901 will continue at the same rate until 1911. On this supposition the population at the middle of the year 1904 should be **73,904**; and it is on this figure that the various rates have been calculated.

During the year the City has been divided into 12 wards in place of the 6 wards hitherto existing. For convenience of future reference the boundaries of these wards, as officially defined, are reproduced in the appendix of this Report. The new wards only very approximately correspond to the old wards; no assistance can therefore be obtained in estimating their populations from the published census returns. In order to obtain an estimate of the populations of the new wards I have relied mostly on the number of houses existing in each. The populations estimated in this way are given in the above table, which also sets out—on this basis—the death rates for the year of the same wards. Too much reliance must not be placed on the accuracy of these

Wards.	Estimated Population, 1904.	Occupied Houses, Census 1901.	Vacant Houses, Census 1901.	Vacant Houses, 1904.	Demolished in 1904.	Death Rate, 1904.	Average Death Rate (10 years).
Radford	6125			43	1	10·4	
Foleshill	6175			81	..	16·8	
Harnall	6990			38	3	12·1	
Swanswell	6655			76	..	16·6	
Bablake	5325			40	5	14·6	
Cheylesmore ..	6110			61	11	30·6	
Hearsall	6100			45	2	11·6	
Grey Friars' ..	6234			29	4	12·0	
Hill Fields	6550			40	..	15·7	
All Saints'	6175			23	1	12·4	
St. Mary's	5810			31	2	18·2	
Stoke	5645			40	..	13·4	
	73904	15571	511	547	29	15·5	16·6

death rates in the face of the fact that the populations are somewhat hypothetical. The death rate of Cheylesmore Ward is high, for the reason that in calculating the rates for this table the deaths which took place in the Workhouse—71 in number—have not been distributed among the various wards from which the inmates were removed before admission to the Workhouse. If this were done the death rate of this ward, instead of being 30.6, would be 18.9.

The division of the City into new wards will for a time render our comparisons of the vital statistics of different parts of the City with those of prior years somewhat difficult.

The following Tables record the vital statistics and general growth of the City, as far as information can be acquired.

Coventry was constituted a separate County by Charter of Henry VI., 1451.

Incorporated with the County of Warwick, 1842.

Constituted a County Borough, 1888.

Area = 4,147 acres.

Rateable Value, 1904	£302,390	0s. 0d.
,, ,, 1894	£162,430	5s. 0d.
,, ,, 1884	£122,890	0s. 0d.

Density of Population, 1904 = 17·8 per acre.
,, ,, 1903 = 17·5 ,,
,, ,, 1902 = 17·2 ,,
,, ,, 1901 = 16·9 ,,
,, ,, 1900 = 16·8 ,,
,, ,, 1899 = 19·72 ,,
,, ,, 1898 = 19·44 ,,
,, ,, 1897 = 19·12 ,,
,, ,, 1891 = 17·04 ,,

Average number of persons to each occupied house, 1904 = 4·3
,, ,, ,, 1903 = 4·2
,, ,, ,, 1902 = 4·4
,, ,, ,, 1901 = 4·5
,, ,, ,, 1900 = 4·5
,, ,, ,, 1899 = 4·6
,, ,, ,, 1898 = 4·7
,, ,, ,, 1897 = 4·9
,, ,, ,, 1891 = 4·5

Year.	Houses Inhabited.	Vacant.	Population.	Mortality.	Zymotic Mortality.	Deaths under one year per 1000 born.	Birth Rate.
1586	....	... .	6,502	.. .	...	... ..	......
1643	. ...	... ...	9,500	.. ...	......	......	... ..
1723	1.934	... ...	... ...	......	......	... ..	......
1748	2,066	....	12,817	32 ?	......	...	35 ?
1801	2,930	......	16,034	... ..	......	... .	......
1811	3 448	*60	17,923	......	......	......	... ..
1821	3,729	*114	21,448	......	.. ...	.. ...	...
1831	5.444	*421	27,298	......	......	.. ...	... ..
1841	6,531	*590	31,032	......	......	......	.. ...
				Ten Years' Average.			
1851	7,783	*151	36,812	27	.. ...	......	...
1861	8.991	*1,026	40,936	25	...	... ..	...
1871	8,535	*816	37,670	22	......	... ..	.. ...
1881	9,223	*643	42,111	20	3·3	150	35·4
1891	11,496	*284	52,724	18·5	1·7	142	32
1901	15.571	... ..	69,877	16·96	1·9	153·7	29·8
1892	11,789	114	54,000	15·4	·85	117	31·7
1893	11,989	165	54.700	17·1	1·1	160	29·9
1894	12,134	213	55,300	16·1	2·1	157	29·0
1895	12,223	261	56,000	17·0	2·0	152	28·1
1896	12,606	48	59,151	16·3	1·8	149	28·3
1897	†12,440	73	61,234	16·8	1·8	157	31·3
1898	†12,939	75	61,555	17·3	2·9	200	31·1
‡1899	†13 297	112	61,796	19·0	2·2	164	30·5
1900	15.461	292	70,075	17·5	2·4	131	32·3
1901	15,571	353	70 300	17·1	2·5	150	29 2
1902	16,240	239	71,475	14·0	1·1	107	28 3
1903	16,821	286	72,684	16·6	2·0	114	29·7
1904	17,202	547	73,904	15·5	1·6	137	31·4

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*This number includes all business offices, whether in dwelling houses or factories, if not occupied on the night the Census was taken.

†This number omits all business offices, factories, etc.

‡These figures omit the added area.

Marriages.

The number of marriages has been 580. This gives a marriage rate of 15.6. The average for the previous ten years was 18.0. The following table shows the relation with the figures of previous years, and with the marriage rate for the country generally :—

Year.	No. of Marriages.	Rate.	Rate for England.
1890	502	19·2	15·5
1891	541	20·2	15·0
1892	416	15·4	15·4
1893	403	14·6	14·7
1894	451	16·2	15·1
1895	471	17·2	15·0
1896	620	21·2	15·8
1897	622	20·2	16·0
1898	634	20·2	16·3
1899	588	18·4	16·5
1900	642	17·5	16·0
1901	578	16·4	15·9
1902	634	17·7	15·8
1903	574	15·7	15·6
1904	580	15·6	

Births.

	Males.		Females.	Total.
Holy Trinity Parish ...	377	+	319	696
St. John's Parish ...	816	+	810	1626
	1193	+	1129	2322

The birth rate for the year has therefore been 31.4. The average rate for the previous 10 years was 29.6.

There were 54 illegitimate births registered, or 2.3 per cent. of the total. In 1903 the percentage was 1.5, and in 1902, 1.5.

The birth rate is compared with that for the whole country in the following table:—

Year.	No. of Births.	Birth Rate.	Rate for England.
1895	1579	28·1	30·4
1896	1679	28·3	29·7
1897	1920	31·3	29·7
1898	1916	30·6	29·4
1899	1871	29·4	29·3
1900	2269	31·0	28·9
1901	2053	29·0	28·5
1902	2023	28·3	28·6
1903	2165	29·7	28·4
1904	2322	31·4	27·9

It will be seen that the Birth Rate has been higher than in any other recent year; probably, however, it must only be regarded as a temporary and accidental rise. There is a steady decrease of the Birth Rate going on both throughout the country and locally. In a town of a limited size this can only be readily seen by grouping years together. In the ten years ending 1881 the birth rate for Coventry was 35.4; in the ten years ending 1891 the rate was 32; in the ten years ending 1901 it was 29.8.

Deaths.

There were 1,132 deaths registered during the year within your City; of these 6 were deaths of non-residents which occurred in public institutions within the City; these have been referred to the districts in which they ordinarily resided; and there were also 21 deaths of residents which occurred in institutions outside the City; these have to be added to the above number. The actual number of deaths therefore which has to be regarded in estimating the death rate is 1,147. This gives a *recorded* death rate of 15.52 per thousand of the population.

The distribution of these deaths in the several wards is given in the table on page 24. On page 16 is represented a table showing the weekly variations in the *uncorrected* death rates for the expired portions of each year for the past ten years.

The following table shows the mean age at death of the persons who died in the past ten years :—

Year.	Total Deaths.	Total completed Years Lived.	Mean Age at Death.
1904	1132	39623	35·0
1903	1188	43270	36·4
1902	1007	36743	36·4
1901	1203	39709	33·0
1900	1223	42687	34·5
1899	1182	40156	36·5
1898	1060	29858	28·1
1897	1037	35045	33 8
1896	965	33544	34·7
1895	953	33486	35·1

To compare the " Recorded " death rate with that of other towns, it is necessary to make an allowance for the difference in age and sex constitution of the different towns. This is done by obtaining from the " Standard " [*] death rate of each town, the " Factor for Correction." [†] The " Standard " death rate of Coventry is 18.18; the " Factor for Correction " is 1.0017; the recorded death rate is then multiplied by this factor for correction, and the resulting figure is the " Corrected " death rate. The corrected death rate of Coventry in 1904 was 15.54; this is very slightly in excess of the recorded death rate, which is another way of saying that in Coventry the sex and age constitution of the population approximates to that of the country generally, but is so circumstanced that it tends slightly to the advantage of Coventry so far as the actual death rate recorded is concerned.

The death rate for England and Wales for the year was 16.2; that for the 76 great towns was 17.2; that for the 142 smaller towns was 15.6; and that for rural England and Wales, 15.3.

[*] The "Standard" death rate signifies the rate at all ages calculated on the hypothesis that the rates for each sex at each of 12 age-periods in each town were the same as in England and Wales during the 10 years 1891-1900, the rate at all ages in England and Wales during that period having been 18.21 per 1,000.

[†] The "Factor for Correction" is obtained by dividing the "Standard" death rate in England and Wales by the "Standard" death rate in each town, and is the figure by which the "Recorded" death rate should be multiplied in order to correct for variations of sex and age distribution. This gives the "Corrected" death rate.

For the purpose of comparison I am inserting the principal vital statistics of the 76 great towns which are now dealt with by the Registrar-General in his weekly returns. These have been

Town.	Estimated Population 1904.	Annual Rate per 1000 living.			Deaths of Children under one year of age to 1000 Births.	Rate per cent. of uncertified Deaths.
		Births.	Deaths.	Principal Infectious Diseases.		
76 Towns	15,271,287	29·1	17·2	2·49	160	1·1
75 Provincial Towns	10,622,337	29·6	17·5	2·65	166	1·5
London	4,648,950	27·9	16·6	2·18	146	0·2
Croydon	144,419	26·0	13·4	1·42	130	..
Willesden	132,566	32·7	11·2	1·62	114	0·6
Hornsey	81,221	19·9	8·4	0·90	87	..
Tottenham	112,981	34·2	13·9	2·14	139	0·1
West Ham	288,424	32·3	16·5	3·33	162	0·2
East Ham	116,902	31·8	13·1	3·13	154	0·4
Leyton	110 844	28·7	12·7	2·56	143	1·4
Walthamstow	111,282	32·5	12 2	2·87	140	0·2
Hastings	66,503	17·4	13·2	0·40	108	0·3
Brighton	126,286	23 5	16·6	1·64	134	0·1
Portsmouth	198,038	28·3	16·9	2·13	142	1·1
Bournemouth	64,645	17·1	13·6	0·61	121	0·3
Southampton	112,500	26·8	13·7	1·08	115	..
Reading	76,373	26·1	13·9	1·80	133	2·1
Northampton	91,146	23·1	13·8	1·60	132	2·2
Ipswich	69,805	27·6	15·5	1·55	143	1·5
Great Yarmouth	52,099	27·8	17·5	2·53	165	0·1
Norwich	115,538	27·6	18·2	2·91	180	0·7
Plymouth	114,003	25·4	18·5	2·53	172	0 1
Devonport	75,334	28·7	13·4	1·24	119	0·2
Bristol	343,204	26·7	15·6	1·64	134	0 4
Hanley	63,932	33·7	20·9	4·10	212	1·1
Burton-on-Trent	51,934	25·9	15·0	1·32	119	1·3
Wolverhampton	98,194	29·9	15·5	2·71	155	0·6
Walsall	91,432	32·9	17·9	3·22	176	0·5
Handsworth	59,634	24·0	11·8	1·35	134	1·6
West Bromwich	67,186	33·8	16·3	1·90	150	1·5
Birmingham	537,965	31·6	19·9	3·42	197	2 7
King's Norton	66,667	28·4	10·6	0·79	100	1·7
Smethwick	60,691	32 3	12·0	1·23	146	3·1
Aston Manor	80,363	29·0	15·0	2·97	184	1·2
Coventry	**73,904**	**31·1**	**15·3**	**1.69**	**138**	**1·6**
Leicester	224,186	26·6	14·5	1·97	167	1·0
Grimsby	66,958	29·3	16·2	3·43	186	1·0
Nottingham	248,811	27·6	17·7	2·58	176	0·8
Derby	120 449	27·4	15·3	1·40	143	0·1
Stockport	97 008	26·5	19·7	3·07	203	0·3
Birkenhead	114,814	33·2	19·6	3·71	181	0·3
Wallasey	60,354	27·8	15·2	2·69	160	1·5
Liverpool	723,430	33·7	22·6	4.65	196	3·2
Bootle	61,755	31·2	18·0	4·17	183	3·6
St. Helens	88,545	37·6	20·9	4·21	177	4·9
Wigan	62.800	35·0	21·5	2·91	187	0·5
Warrington	67,331	33·4	19·9	4·57	172	4·6
Bolton	175,744	26·8	16·9	2·28	168	0·5

Town.	Estimated Population 1904.	Annual Rate per 1000 living.			Deaths of Children under one year of age to 1000 Births.	Rate per cent. of uncertified Deaths.
		Births.	Deaths.	Principal Infectious Diseases.		
Bury	58,450	23 8	16·9	2·34	164	2·1
Manchester	557,938	31·3	21·3	3·09	187	1·9
Salford	228,983	31·8	21·2	4 37	192	0·4
Oldham	139,497	24·9	18·2	2·31	156	0·2
Rochdale	85.601	22·8	17·7	2·03	152	2·3
Burnley	100 569	26·6	19·5	3·93	229	1·7
Blackburn	132,134	23 4	16·9	2·36	191	2·8
Preston	115,055	28·1	19·2	2·93	185	3·3
Barrow-in-Furness	59,654	31·8	13·7	1·34	120	2·7
Huddersfield	94,925	23 7	17·5	1·91	136	1·6
Halifax	107,580	20·0	15 5	1·50	128	1·9
Bradford	285,089	22·1	17·6	2·42	166	0·7
Leeds	450,142	28·0	18·0	2·56	175	0·2
Sheffield	432,940	32 0	16·8	2·20	158	2·8
Rotherham	58,498	33 0	15·8	2·39	163	2·8
York	81,268	28·2	16·2	2·81	172	0·2
Hull	253,865	31 0	18·6	3·52	178	1·1
Middlesborough	96,684	36·2	19·8	2·79	169	1·4
Stockton-on-Tees	52,192	31·8	14·7	2·57	149	1·1
West Hartlepool	69,251	32 2	14·0	1·97	132	0·6
Sunderland	151,157	25 8	19·5	2·33	164	3·4
South Shields	107,334	34·0	17·9	1·76	145	5·0
Gateshead	118,067	34·4	18·5	2·88	174	4·0
Newcastle-on-Tyne	225,362	30·5	19·4	1·79	156	0·3
Tynemouth	53,060	34·9	19·2	1·93	154	1·9
Newport (Mon.)	71,543	33·1	15·7	1·64	152	0·4
Cardiff	176,313	29·6	14·8	1·80	146	0·2
Rhondda	122,310	39 8	19·1	3·80	190	0·8
Merthyr Tydfil	72,745	38·1	19·7	2·53	186	0·3
Swansea	95,931	31·3	18·0	2·23	174	1·3

extracted from a table published in "The British Medical Journal"; the official Annual Summary of the Registrar-General has not yet been issued. It will be noted that there is a discrepancy between the figures given in the table and those in the body of this Report; this is partly accounted for by the fact that the year dealt with in the table does not commence on January 1st and end in December, as in this Report, but accommodates itself to the beginning and ending of the nearest week; and also by the fact that the correction for those deaths which occurred among residents outside the district is not so completely made. It will be noted that the birth rate of Coventry is slightly above that of the 76 large towns; the death rate is well below the average; the rate from the principal infectious diseases is below the average; while the infantile death rate is well below the average.

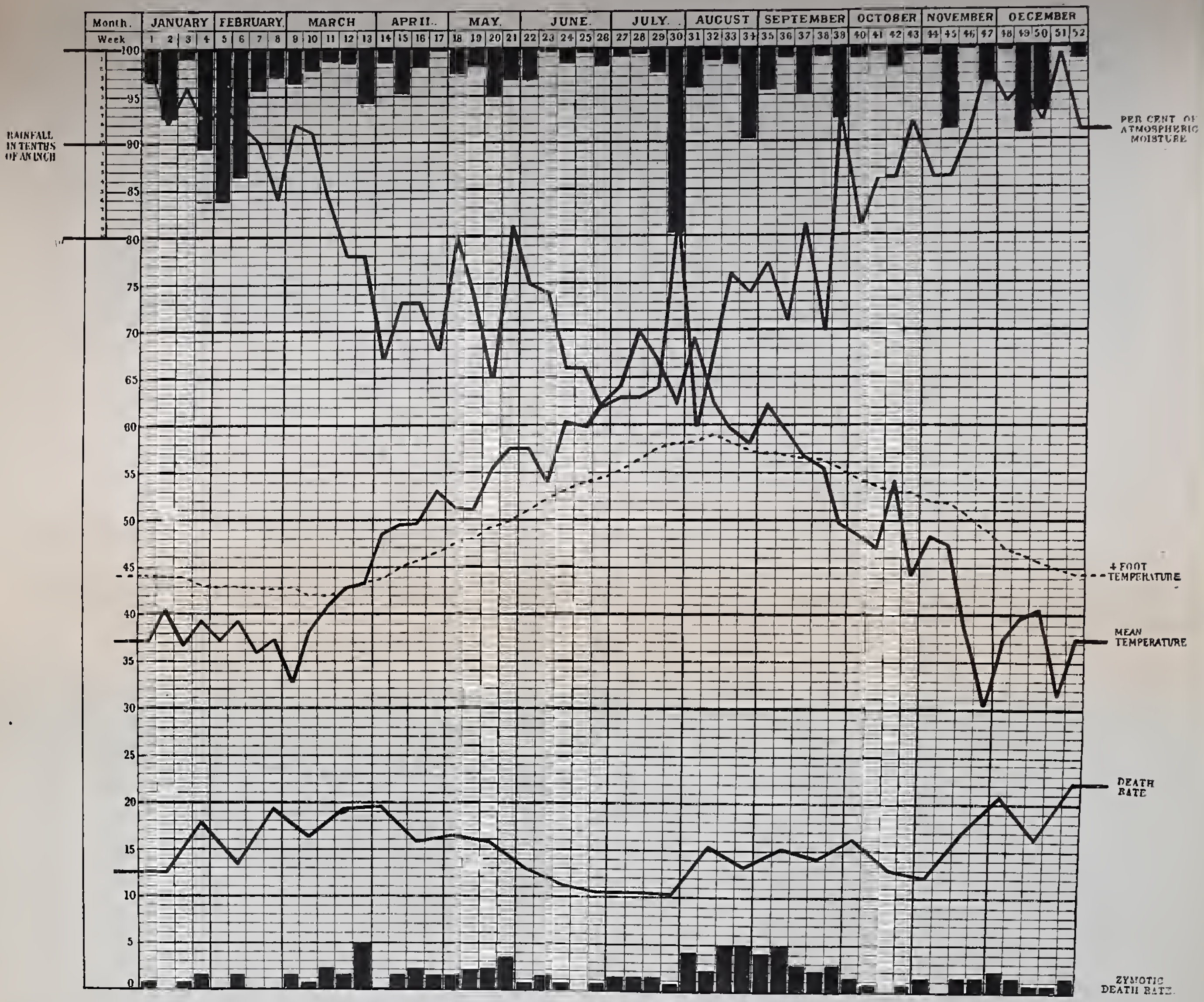
DEATH RATE.

From 1st of January each year to the end of each week, or to the Saturday nearest to the date mentioned in the first column for the past 10 years.

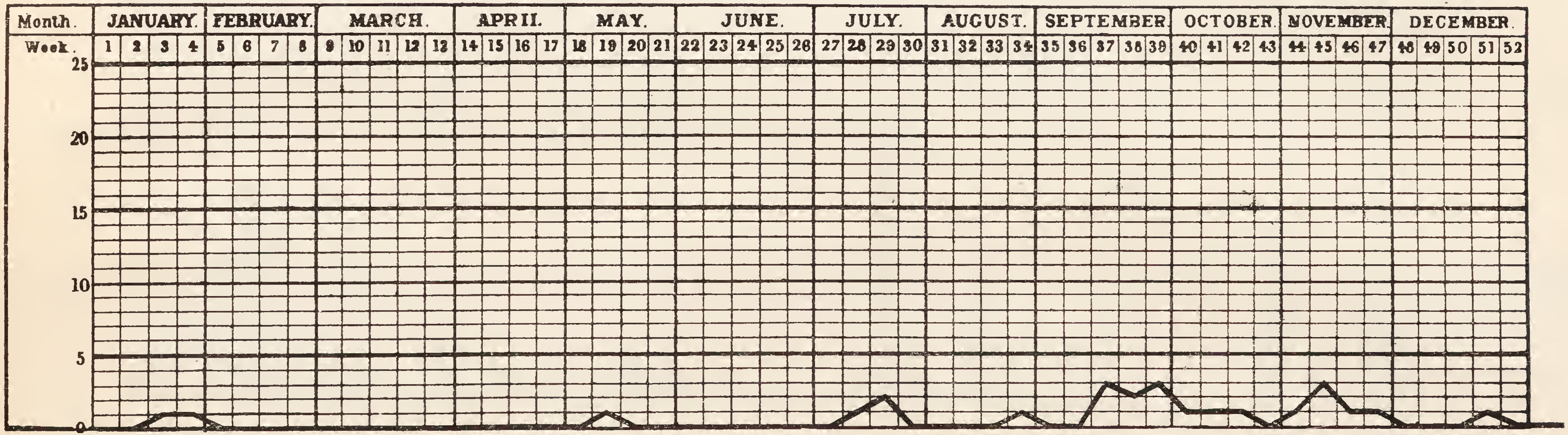
Week.	Date.	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	Av'rage for past 10 years.
	Jan.											
1	,, 7	11·0	11·2	19·9	18·2	15·6	17·8	17·0	10·2	14·0	13·0	14·7
2	,, 14	11·1	11·6	20·6	19·9	13·9	17·7	19·6	12·2	14·0	13·1	15·3
3	,, 21	11·2	12·5	20·6	19·6	15·8	16·5	21·9	12·7	14·4	14·3	15·9
4	,, 28	11·0	11·4	22·4	18·9	16·0	16·8	21·3	12·8	14·4	13·6	15·8
	Feb.											
5	,, 4	11·4	10·4	21·5	20·1	16·5	17·3	19·4	13·7	17·0	14·0	16·1
6	,, 11	11·8	12·0	21·7	20·5	17·1	17·4	18·6	12·8	17·0	14·1	16·3
7	,, 18	12·8	13·1	20·7	19·8	17·1	18·4	18·2	13·8	15·9	14·9	16·4
8	,, 25	14·0	13·0	20·5	19·2	16·9	18·3	18·2	15·2	15·9	14·8	16·6
	Mar.											
9	,, 4	15·8	12·9	21·2	19·2	17·5	18·0	17·8	15·5	17·0	15·5	17·0
10	,, 11	18·4	13·0	20·6	18·9	18·8	18·0	18·5	15·6	17·0	15·9	17·4
11	,, 18	19·6	13·0	18·8	18·5	19·4	18·0	17·1	15·3	16·9	16·0	17·2
12	,, 25	20·4	13·3	18·6	18·0	20·0	18·3	18·0	15·3	16·8	16·0	17·4
	April											
13	,, 1	20·5	13·5	18·4	17·7	20·9	17·5	16·8	15·4	16·4	16·0	17·3
14	,, 8	20·1	13·4	18·5	17·7	21·4	17·9	18·1	15·4	16·4	16·2	17·3
15	,, 15	19·9	13·6	18·3	17·2	21·3	17·5	16·8	15·4	15·9	16·4	17·2
16	,, 22	19·6	13·6	17·9	16·9	21·2	17·3	18·2	15·5	15·9	16·7	17·2
17	,, 29	19·9	13·6	18·0	16·4	21·4	17·4	17·1	15·5	16·4	16·7	17·1
	May											
18	,, 6	19·7	13·7	17·5	16·1	21·2	17·2	17·0	15·5	16·4	16·6	17·0
19	,, 13	19·5	13·8	17·4	15·7	21·2	16·8	16·8	15·5	16·8	16·6	16·9
20	,, 20	19·3	13·8	17·4	15·3	21·1	16·6	18·2	15·4	16·7	16·5	17·0
21	,, 27	19·2	13·8	17·5	15·2	20·8	16·3	17·7	15·5	16·8	16·4	16·9
	June											
22	,, 3	18·7	13·9	17·4	15·0	20·4	16·1	17·6	15·5	16·9	16·0	16·7
23	,, 10	18·6	14·2	17·2	14·8	20·5	16·0	16·6	15·8	17·0	15·9	16·6
24	,, 17	18·4	14·2	17·2	14·6	20·3	15·7	17·2	15·1	17·0	15·3	16·5
25	,, 24	18·1	13·8	17·2	14·6	20·1	15·6	16·2	14·8	17·7	15·4	16·3
	July											
26	,, 1	18·3	13·7	17·2	14·5	19·9	15·1	16·5	14·7	17·6	15·3	16·2
27	,, 8	18·3	13·7	17·0	14·3	19·6	15·6	16·9	14·7	17·6	15·0	16·2
28	,, 15	18·8	13·8	17·0	14·3	19·5	15·5	17·0	14·7	17·6	14·7	16·2
29	,, 22	18·8	13·9	17·1	14·5	19·3	15·3	16·8	14·5	17·5	14·5	16·2
30	,, 29	18·9	14·9	17·5	14·9	19·0	15·2	16·1	15·0	17·5	14·6	16·4
	Aug.											
31	,, 5	19·0	14·9	17·3	15·4	19·2	15·2	17·4	14·7	17·4	14·0	16·4
32	,, 12	18·9	15·1	17·5	15·9	19·1	15·1	17·6	14·6	17·0	14·0	16·4
33	,, 19	18·9	15·2	17·7	16·2	19·3	15·3	17·7	14·7	16·7	14·2	16·6
34	,, 26	18·7	15·1	17·9	16·8	19·4	15·4	17·7	14·6	16·7	14·2	16·6
	Sept.											
35	,, 2	18·5	15·1	18·0	17·1	19·3	15·7	17·9	14·6	16·7	14·2	16·7
36	,, 9	18·2	15·2	18·0	17·3	19·6	15·9	17·8	14·5	16·7	14·3	16·7
37	,, 16	18·2	15·0	17·8	17·3	19·5	16·2	17·4	14·5	16·5	14·6	16·7
38	,, 23	17·9	15·0	17·8	17·4	19·3	16·2	17·5	14·4	16·5	14·5	16·6
39	,, 30	17·7	15·0	18·2	17·5	19·2	16·2	17·3	14·5	16·5	14·6	16·7
	Oct.											
40	,, 7	17·7	15·0	18·1	17·5	19·1	16·3	17·1	14·3	16·4	14·7	16·6
41	,, 14	17·6	15·1	17·9	17·3	19·1	16·0	17·3	14·3	16·3	14·7	16·5
42	,, 21	17·5	15·1	17·7	17·1	19·1	16·4	17·0	14·4	16·3	14·4	16·5
43	,, 28	17·5	15·1	17·5	17·0	18·9	16·5	16·6	14·3	16·2	14·5	16·4
	Nov.											
44	,, 4	17·6	15·3	17·4	17·0	18·7	16·5	17·0	14·1	16·2	14·5	16·3
45	,, 11	17·4	15·8	17·3	17·0	18·6	16·6	16·9	14·1	16·2	14·5	16·4
46	,, 18	17·4	15·9	17·3	16·8	18·5	16·1	16·8	14·2	16·1	14·5	16·3
47	,, 25	17·3	16·1	17·1	16·8	18·3	16·5	16·0	14·0	16·2	14·5	16·2
	Dec.											
48	,, 2	16·5	16·5	17·0	16·8	18·4	16·6	16·9	14·9	16·3	14·7	16·3
49	,, 9	16·4	16·6	17·0	16·9	18·4	16·7	17·1	14·1	16·2	14·8	16·4
50	,, 16	16·3	16·6	17·0	16·8	18·5	16·7	17·0	13·9	16·2	14·9	16·4
51	,, 23	16·4	16·6	16·9	16·8	18·4	16·6	17·1	13·9	16·2	14·8	16·3
52	,, 30	16·4	16·6	17·0	16·9	18·4	16·6	17·1	13·9	16·3	15·0	16·4

CITY OF COVENTRY, 1904.

Chart illustrating the relations between the death rates and principal meteorological conditions.



WEEKLY NOTIFICATIONS OF TYPHOID FEVER 1904.



Meteorology.

Meteorological observations are made daily at the City Hospital, and posted at St. Mary's Hall and at the Free Library. Monthly records of them are forwarded to the Registrar-General, and published by him in his quarterly Returns of Vital Statistics, together with the records of other recognized meteorological stations. These records are summarized by the Meteorological Office.

The relationship existing between the death rate and the Temperature and Humidity of the Atmosphere is graphically represented in the curves on the plate opposite page 16.

The summary of the meteorological observations taken during the year is given on page 22.

The highest temperature recorded in the shade was on August 4th, when 86° F was reached. Freezing point or below was recorded in the screen on 76 days during the year; these days were distributed throughout the months as follows :—

January	18.	July	
February	17.	August	
March	13.	September	
April		October	1.
May		November	13.
June		December	14.

The highest temperature recorded four feet below the surface of the ground was 59° F. on August 7-12th, and that one foot below the surface was 66° F. on July 11th, 16th, 25th, 26th.

Rain fell on 169 days. The total rainfall at the City Hospital amounted to 19.975 inches, or 12.770 inches less than in 1903. This is the lowest since 1898, when it was 19.86.

The greatest fall recorded in any 24 hours from 9 a.m. to 9 a.m., was noted on July 25th, when the amount collected was 1.09 inches.

In addition to the ordinary rain-gauge situated on the ground there is an automatic rain-gauge at this station; its funnel is situated 4 feet 11 inches above the ground; this collected 14.65 inches of rain.

The daily records of rainfall for the year are given on pages 18 and 19.

RAINFALL, 1904.

Date.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.
	in.	in.	in.	in.	in	in.	in	in.	in.	in.	in.	in.
1	..	·07	·05	..	·25	·07	..	..	..	·005	01	..
2	..	·08	·17	·05	..	..	·17	..	·42	..	..	·01
3	·10	·63	·02	·03	..	..	·08	·06	·01	..	..	·06
4	·02	.12	·08	·02	..	..	·01	·35	..	..	..	·11
5	·05	·02	·05	·09	·01	..	·01	..	..	·04	..	·15
6	·06	·25	·02	..	·01	..	..	·01	..	..	·28	·17
7	·09	·34	·21	..	..	..	..	..	·09	·09	·16	·03
8	·01	·14	..	..	..	..	..	..	·03	..	·14	..
9	·01	·36	..	01	·15	·03	..	..	..	·04	·09	·26
10	·23	·16	..	..	·02	..	..	..	..	·02	·22	·19
11	·07	..	..	..	·02	..	..	·09	..	..	..	·32
12	·12	·29	..	·11	..	..	06	..	·33	..	..	..
13	·28	·07	..	·09	..	·01	..	·05	..	..	..	·18
14	·01	·08	·06	·07	..	·14	..	·04	·17	..	..	·07
15	..	·02	..	·21	..	·01	..	·02	..	..	·02	·02
16	·02	·07	..	..	..	..	..	·03	..	·19	..	..
17	·06	·14	..	..	..	·01	..	·08	..	..	..	·11
18	·02	..	..	..	..	..	..	..	..	..	..	..
19	..	·12	·07	..	..	..	..	·01	..	..	·01	·01
20	·01	..	..	..	·37	..	..	..	..	..	..	..
21	..	·01	·05	..	·13	..	..	·10	..	·04	·21	..
22	..	..	..	·20	..	..	·03	·81	·05	..	·01	..
23	..	..	..	..	·11	..	·23	..	·05	·02	·16	..
24	..	..	·06	·02	·01	·04	·01	..	·01	·05	..	·01
25	..	..	·04	..	·03	..	1·09	·07	·09	..	..	..
26	·28	·16	..	..	·05	..	..	..	..	..	..	·04
27	·17	..	..	..	·13	..	·20	..	..	..	..	·04
28	..	..	·26	..	..	..	·01	..	..	..	..	·01
29	·32	..	·07	..	..	..	·52	..	..	..	..	·07
30	·28	..	·18	..	·19	·02	·14	..	·67	·04	..	..
31	·45	..	·02	..	·07	..	..	·01	..	·06	..	..
Totals	2·66	3·13	1 41	·90	1·55	·33	2·56	1·73	1·92	·595	1·31	1·88
T'tal from Jan. 1		5·79	7·20	8·10	9·65	9·98	12·54	14·27	16·19	26·785	18·095	19·975

RAINFALL AT DIFFERENT LOCAL STATIONS.

1904.

	City Hospital.	Davenport Road.	Spencer Road.
January	2·66	2·37	2·71
February	3·13	4·09	3·42
March	1·41	1·51	1·58
April	·90	1·08	1·15
May	1·55	1·51	1·58
June	·33	·45	·41
July	2·56	2·55	2·32
August	1·73	1·86	1·69
September	1·92	1·24	1·89
October	·595	1·32	·57
November	1·31	1·51	1·59
December	1·88	1·93	1·97
Total	19·975	21·42	20·88

For the records of rainfall at Davenport Road and Spencer Road, I am indebted to the courtesy of Mr. Alderman Andrews and Major R. B. Caldicott respectively.

The monthly amounts of rain registered at the City Hospital are given below, together with the corresponding tables for the previous twelve years:—

	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
January ..	1·26	·67	1·57	3 82	1·27	1·98	·79	3·45	3·44	·98	1·04	2·17	2·66
February	·87	3·07	2·21	·16	·50	3·06	1·03	2·60	3 82	1 64	1·51	1·05	3·13
March ..	·80	·38	1·01	1·94	2·38	2·78	84	1·21	·62	1 78	1·68	4·03	1·41
April ..	·80	·355	1·63	1·92	1 07	2 23	1·98	1·87	1·27	1·92	2·19	1·555	·90
May ..	1·51	1·98	2·39	·575	·36	1·95	2·55	2 35	1·66	·88	2·24	3·21	1·55
June ..	3·90	99	1·71	·94	3·52	2·68	·72	1·61	3·15	2·64	2·47	2·65	·33
July ..	2·67	1·845	2·58	2 80	2·345	·36	1 045	1·11	1·62	2·46	1·48	2·69	2·56
August ..	2·58	1·76	2·32	2·225	2 12	3·78	3·54	1·285	3·00	1·725	3·47	3·97	1·73
September	2·35	1·17	2·26	79	4·46	2·25	·63	1·73	·45	1·21	1·09	2·13	1·92
October ..	2·62	3·085	2 99	2·99	2 51	1·74	2·58	2·16	2·77	1·30	2·29	6·38	·595
November	2·17	1·42	2.55	3·81	1·31	1·40	1 90	1·53	1·99	·69	1·595	1·57	1·31
December	1·41	2·165	2 43	2·02	3·36	2·58	2·26	1·80	5·09	4·19	1·48	1·34	1·88
Totals ..	22·94	19·89	25·66	23·99	25·205	26·79	19·865	25·705	28·88	21·415	22·535	32·745	19·975

The average yearly rainfall at this station for the preceding twelve years, 1892 to 1903, was 26.30 inches. The rainfall for 1904 was therefore 6.32 inches below the average for these years.

The average rainfall for 8 normal climatological stations in the Midland Counties, as recorded by the Meteorological Office, was 22.38 in 1904.

The hours of bright sunshine recorded by the Jordan's Sunshine Recorder at the City Hospital were not much below the average, as shown by the following figures:—

1895 ...	1,495 hours	1900 ...	1,166 hours
1896 ...	1,111 ,,	1901 ...	1,214 ,,
1897 ...	1,367 ,,	1902 ...	967 ,,
1898 ...	1,326 ,,	1903 ...	1,096 ,,
1899 ...	1,482 ,,	1904 ...	1,209 ,,

During the year, on the recommendation of the Meteorological Office, a Campbell-Stokes Sunshine Recorder has been added to this station.

A Meteorological Station has now existed at the City Hospital for thirteen years. The records give data for calculating the "mean" monthly temperatures. These may be obtained by taking the mean of the maximum temperatures and the mean of the minimum temperatures for each month in each year, and then the means of these for each month in each year. The mean of the corresponding months for all the years gives the "mean" monthly temperature for this station. These are given in the following table:—

	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	Average for 13 years.
January ..	36·1	34·9	37·2	31·7	40·45	33·9	43·0	41·1	39·55	37·7	40·9	39·4	38·8	38·0
February	38·8	40·1	41·4	28·3	39·7	41·8	40·05	41·0	36·4	38·3	34·4	44·7	38·0	36·3
March ..	38·2	45·5	43·9	41·9	44·5	44·3	39·5	41·5	38·3	39·25	44·9	44·4	40·9	42·0
April ..	47·1	52·0	49·1	47·1	48·05	44·7	47·2	47·1	47·3	47·8	46·4	44·1	49·0	47·4
May ..	54·2	56·5	48·2	54·2	53·3	50·4	50·8	49·4	50·9	52·85	48·6	52·5	52·8	51·9
June ..	57·0	62·0	57·1	59·0	61·6	59·9	56·5	59·9	59·1	57·0	57·4	56·6	57·6	58·5
July ..	58·2	63·8	58·4	60·3	62·0	62·4	60·1	64·3	65·0	64·95	59·5	60·2	64·6	61·8
August ..	59·8	64·5	55·0	60·9	57·5	62·0	62·4	64·8	60·5	60·1	58·5	58·1	59·5	60·3
September	55·2	56·0	53·0	60·6	55·8	53·7	59·6	56·4	56·9	57·0	55·4	56·4	55·5	56·3
October ..	45·0	50·0	48·9	43·2	44·4	49·6	52·1	48·3	49·7	49·2	49·7	51·6	49·9	47·8
November	43·9	41·3	45·6	45·4	39·1	45·2	44·7	47·0	44·7	41·0	41·0	43·5	40·8	43·3
December	33·8	39·8	40·6	38·6	38·3	40·9	45·5	36·4	44·7	37·9	40·5	38·3	38·7	39·5

Meteorological Observations made at the City Hospital, Coventry, 1904.

Lat. 52° 24′ 34″ Long. 1° 30′ 20″ Height above mean Sea Level 270ft.

The cistern of the barometer is situated 309 feet above sea level.

1904	Baro-meter.	Air Temperature.							Hygrometer.				Earth Temperature.		Bright Sunshine.		Cloud.	Rain and other Forms of Precipitation.				Weather, No. of Days of							Wind Force (0-12.)		Wind Direction. No. of observations at 9 a.m. and 9 p.m.							
		Mean of			Absolute Minimum and Maximum.				Mean of Observations at 9 a.m.											Most in a Day.																		
	Mean Pressure at 32° F. at Station Level.	A Min'm.	B Max'm.	Mean of A and B.	Minimum.	Day of Month.	Maximum.	Day of Month.	Dry Bulb.	Depression of Wet Bulb.	Vapour Pressure.	Humidity.	At 1 foot depth.	At 4 feet depth.	Total Possible.	Total Observed.	Mean of Observations of Amount at 9 a.m. (Scale 0-10).	Number of Days.	Total Fall.	Amount.	Day of Month.	Snow.	Hail.	Thunderstorm.	Clear Sky.	Overcast.	Fog.	Gale.	Number of Observations of Moderate and Strong Winds.	Calm.	N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.
	ins.	o	o	o	o	o	o		o	o	in.	%	o	o	hrs.	hrs.			ins.	ins.																		
JAN.	29·565	32·5	45·2	38·9	26·0	24	52·0	5,13	38·0	0·6	·216	95	38·3	43·9	249	19 0	7·8	21	2·66	0·45	31	3	1	1	6	22	4	0	0	0	4	0	8	10	20	6	8	6
FEB.	29·206	23 3	43·8	38·1	23·0	29	56·0	21	36·9	1·3	·194	89	38 4	42·9	282	34·7	7·4	19	3·13	0·63	3	7	0	0	4	17	0	0	2	0	2	4	10	8	8	18	6	2
MAR.	29·641	33·7	48·1	40 9	23·0	1	59·0	9,20	39·8	1·9	·208	85	39·8	42·6	364	81·1	6·4	16	1·41	0·26	28	4	1	0	7	17	0	0	0	0	12	10	6	2	12	10	2	8
APR.	29·568	40·8	57 3	49·1	33·0	17	65·0	8,24	50·1	4·7	·252	69	47·1	45 3	413	146·8	6·1	11	0·90	0·21	15	0	0	0	5	11	0	0	2	2	4	4	0	6	10	12	14	8
MAY	29·584	44·1	61·7	52·9	34 0	8	72·0	16	54·4	4·3	·309	73	53·3	49·0	484	129·3	7·0	15	1·55	0·37	20	0	1	0	3	16	0	0	0	0	8	6	6	6	4	20	6	6
JUNE	29·703	47·5	67·8	57·7	42·0	4,28	79·0	30	58·9	5·9	·331	66	58·9	53·1	496	172·7	5·6	8	0·33	0·14	14	0	0	0	4	10	0	0	0	0	0	18	6	0	10	8	12	6
JULY	29·683	54·2	75·3	64·8	46·0	28	84·0	10,15	65·6	6·1	·426	69	63·9	56·6	497	195·6	5·9	13	2·56	1·09	25	0	0	2	10	15	0	0	0	0	2	6	14	4	18	12	2	4
AUG.	29·671	49·8	70 4	60·1	40·0	25	86·0	4	62·7	5·6	·394	69	61·1	58·0	448	176·5	4·3	14	1·73	0 81	22	0	0	2	8	7	0	0	2	0	4	4	4	10	16	8	12	4
SEPT.	29·730	45·7	65 3	55·3	37·0	11	73·0	5,6	55·7	3·5	·348	78	56·4	56·4	374	126·3	6·2	11	1·92	0·67	30	0	0	0	10	17	0	0	2	0	8	8	10	6	12	6	8	2
OCT.	29·778	42·0	58·0	50·0	32·0	13	67·0	18	48·7	1·7	301	88	50·5	53·6	323	66·0	7·2	11	0·60	0·19	16	0	0	0	6	16	1	0	0	0	2	8	14	8	8	10	8	4
NOV.	29·735	33 0	48·7	40·9	9·0	24	61·0	9	39·6	0·9	·225	93	43·9	50·4	256	38·6	7·4	11	1·31	0·28	6	3	0	0	6	19	5	0	0	0	4	4	0	2	12	8	26	4
DEC.	29·580	32·7	44·7	38·7	20·0	23	58·0	17	37·7	0·8	·211	93	39·3	45·3	231	22·3	8·5	19	1·88	0 32	11	3	0	0	2	23	4	0	2	10	4	2	6	4	10	14	4	8
																1209·10		169	19·975			20	3	5	71	190	14	0										

YEAR.	Population estimated to middle of each year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.				TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	NETT DEATHS AT ALL AGES BELONGING TO THE DISTRICT.	
				Under 1 Year of Age.		At all Ages.						
		Number.	Rate.*	Number.	Rate per 1,000 Births registered	Number.	Rate.*				Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1894	55,300	1604	29·0	253	157	903	16·3	116	12	?	891	16·1
1895	56,000	1579	28·1	240	152	953	17·0	114	?	?	953	17·0
1896	59,151	1679	28·3	251	149	965	16·3	110	?	?	965	16·3
1897	61,234	1920	31·3	302	157	1038	16·9	143	18	10	1030	16·8
1898	61,555	1916	31·1	383	200	1050	16·9	139	14	9	1055	16·8
1899	61,796	1886	30·5	312	164	1182	18·6	145	29	15	1168	18·4
1900	70,075	2269	32·3	298	131	1223	17·4	169	11	15	1227	17·5
1901	70,300	2053	29·2	309	150	1206	17·1	137	14	11	1203	17·1
1902	71,475	2023	28·3	217	107	1002	14·0	130	3	8	1007	14·0
1903	72,684	2165	29·7	218	114	1189	16·3	175	7	25	1207	16·6
Averages for years 1894-1903.	63,957	1909	29·7	281	148	1072	16·6	137	14	13	1071	16·6
1904	73,904	2322	31.4	319	137	1132	15·3	132	6	21	1147	15·5

Institution within the District receiving sick and infirm persons from outside the District	Coventry and Warwickshire Hospital.
Institutions outside the District receiving sick and infirm persons from the District	Hatton Asylum. Pinley Hospital. General Hospital, Birmingham.
Other Institutions, the deaths in which have been distributed among the several localities in the District	Workhouse. Ford's Hospital. Bond's Hospital.

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

NOTE.—The deaths included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district. The deaths included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "Residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

The "Public Institutions" taken into account for the purposes of these tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses, and lunatic asylums. A list of the Institutions in respect of the deaths in which corrections have been made is given on the side of this table.

Area of District in acres (exclusive of area covered by water), 4,147 acres.

At Census of 1901—Total population at all ages, 69,978; number of inhabited houses, 15,571; average number of persons per house, 4·5.
The Union Workhouse is within the City.

TABLE II.-(L.G.B.)

NAMES OF LOCALITIES.	WHOLE CITY. 1.				BISHOP STREET WARD. 2.			GOSFORD STREET WARD 3.			EARL STREET WARD. 4.			WHITE FRIARS' WARD. 5.			SPON STREET WARD. 6.			NORTH EAST WARD. 7.		
Year.	Population estimated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.	Population estimated to middle of each year.	Deaths at all ages.	Deaths under 1 year.
	a.	b.	c.	d.	a.	c.	d.	a.	c.	d.	a.	c.	d.	a.	c.	d.	a.	c.	d.	a.	c.	d.
1894	55,300	1604	903	253	13,526	234	73	13,463	192	62	10,962	146	45	8840	211	37	8509	120	36	..	..	..
1895	56,000	1579	953	240	13,877	246	62	13,611	217	67	11,133	166	44	8835	221	44	8564	103	23	..	..	..
1896	59,151	1679	965	251	15,328	263	63	14,480	229	85	11,768	155	46	8830	210	39	8745	108	18	..	..	..
1897	61,234	1920	1038	302	16,854	266	92	14,606	239	76	12,186	183	51	8825	216	47	8763	134	36	..	..	..
1898	61,555	1916	1060	385	16,898	340	134	14,728	228	94	12,266	151	51	8820	217	62	8843	124	44	..	..	..
1899	61,796	1886	1172	308	16,954	332	80	14,754	270	82	12,285	198	49	8815	229	53	8988	143	40	..	..	..
1900	70,075	2269	1227	298	17,140	343	68	14,811	255	59	12,340	176	37	8756	241	39	8990	165	51	8038	147	44
1901	70,300	2053	1203	309	17,159	292	86	14,821	249	66	12,354	176	50	8475	210	42	8999	141	33	8492	135	32
1902	71,475	2023	1007	217	17,602	234	60	14,951	182	43	12,510	158	32	8438	204	23	9036	109	18	8903	120	40
1903	72,684	2165	1207	248	18,175	288	69	15,082	214	57	12,695	167	26	8379	256	33	9075	133	29	9278	149	34
Averages of Years 1894 to 1903	63,957	1909	1073	282	16,361	285	78	14,530	227	69	12,050	167	43	8701	221	42	8851	128	33	8677	137	37
1904	73,904	2322	1147	319	SWANSWELL WARD.			ALL SAINTS' WARD.			HEARSALL WARD.			CHEYLESMORE WARD.			RADFORD WARD.			FOLESHILL WARD.		
					6655	111	40	6175	87	22	6100	71	16	6110	187	40	6125	64	17	6175	104	38
					HARNALL WARD.			HILL FIELDS WARD.			GREY FRIARS' WARD.			ST. MARY S WARD			BABLAKE WARD.			STOKE WARD.		
					6990	85	32	6550	103	31	6234	75	15	5810	106	23	5325	78	21	5645	76	24

NOTES.—(a) The separate localities adopted for this table are areas of which the populations are obtainable from the census returns. Block 1 is used for the whole district; and blocks 2, 3, &c., for the several localities.

(b) Deaths of residents occurring beyond the district are included in sub-columns c of this table, and those of non-residents registered in the district excluded. (See Note on Table I. as to the meaning of terms "resident" and "non-resident")

(c) Deaths of residents occurring in public institutions are allotted to the

TABLE III. (L.G.B.)

Cases of Infectious Disease notified during the Year 1904.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.							TOTAL CASES NOTIFIED IN EACH LOCALITY.													NO. OF CASES REMOVED TO HOSPITAL FROM EACH LOCALITY.												
	At all Ages.	At Ages—Years. Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 & upwards.	Radford Ward. 1	Foleshill Ward. 2	Harnall Ward. 3 (H)	Swanswell Ward. 4	Bablake Ward. 5	Cheylesmore Ward. 6 (W)	Hearsall Ward. 7	Grey Friars' Ward. 8	Hill Fields Ward. 9	All Saints' Ward. 10	St. Mary's Ward. 11	Stoke Ward. 12	Whole City. 13	Radford Ward. 1	Foleshill Ward. 2	Harnall Ward. 3 (H)	Swanswell Ward. 4	Bablake Ward. 5	Cheylesmore Ward. 6 (W)	Hearsall Ward 7	Grey Friars' Ward. 8	Hill Fields Ward. 9	All Saints' Ward. 10	St. Mary's Ward. 11	Stoke Ward. 12	Whole City. 13
Small-pox ..	5	..	..	..	2	3	..	..	1	..	2	1	..	..	..	..	..	..	1	5	..	1	..	2	1	..	..	..	..	..	.	1	5
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diphtheria ..	74	1	22	40	6	5	..	4	30	5	5	..	3	6	3	4	6	6	2	74	..	2	..	1	..	..	..	..	2	1	1	..	7
Membranous croup	4	..	4	..	..	..	..	..	2	..	..	..	..	1	..	..	..	1	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	67	3	3	2	11	38	10	4	8	6	9	5	5	..	6	6	11	4	3	67	..	..	..	2	..	..	..	1	..	..	2	..	5
Scarlet fever ..	222	5	73	115	22	7	..	18	28	31	21	19	9	16	14	19	10	26	11	222	14	27	30	21	16	7	16	9	16	10	22	10	198
Typhus fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric fever ..	24	..	..	13	6	5	..	5	4	1	1	3	..	1	2	3	1	2	1	24	5	3	1	1	3	..	1	2	3	1	2	..	22
Relapsing fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued fever ..	1	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	1
Puerperal fever ..	9	..	..	..	..	9	..	1	..	2	1	1	..	..	..	1	2	..	1	9	..	..	..	..	..	..	..	..	..	1	..	..	1
Plague	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
*Chicken-pox ..	197	19	105	72	..	1	..	14	18	21	48	13	9	25	10	11	5	12	11	197	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	603	28	207	242	48	68	10	46	91	66	88	42	26	49	35	44	35	51	30	603	19	33	31	28	20	7	17	12	21	13	27	11	239

NOTES.—The localities adopted for this table are the same as those in Tables II. and IV.
Mark (H) indicates the locality in which the City Hospital is situated.
The Pinley Hospital is situated outside the boundary in St. Michael's Without.
*Chicken-pox was notifiable from May 15th.

TABLE IV.—(L.G.B.)

Causes of, and Ages at, Death during Year 1904.

CAUSES OF DEATH.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the district.							Deaths at all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.												Total Deaths whether of Residents or "Non-Residents" in Public Institutions in the District.
1	All ages. 2	Under 1 year. 3	1 and under 5 4	5 and under 15. 5	15 and under 25. 6	25 and under 65. 7	65 and upwards. 8	Radford Ward. 9	Foleshill Ward. 10	Harnall Ward. 11	Swanswell Ward. 12	Bablake Ward. 13	Ch'y'lsmore Ward 14	Hearsall Ward. 15	GreyFriars Ward 16	Hill Fields Ward 17	All Saints' Ward 18	St. Mary's Ward. 19	Stoke Ward. 20	21
Small Pox	1	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..
Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever ..	10	..	6	4	..	..	..	..	2	..	..	..	..	..	1	4	1	2	..	8
Whooping-cough ..	48	28	20	.	..	.	..	6	..	6	5	4	5	2	4	5	5	3	3	..
Diphtheria and Membranous Croup ..	11	1	6	3	1	.	..	1	3	..	..	..	..	2	..	..	3	2	..	..
Croup	2	..	2	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..
Fever { Typhus ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..		..	..
Fever { Enteric ..	1	..	..	1	..	..	..	1	..	..	..	..	..	.	..	..	..	..	..	..
Fever { Other cont'd	..	..	.	..	..				..	..	..	..	..	..	..	..	..	..	..	..
Epidemic Influenza	15	3	.	1	..	5	6	..	1	2	1	3	1	1	3	1	..	1	1	..
Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Plague	..	.	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhœa. (*See* notes at foot)	49	40	7	..	..	1	1	2	10	4	11	3	1	1	5	4	1	4	3	..
Enteritis. (*See* notes at foot)	10	7	1	..	..	2	..	..	..	.	1	..	1	..	..	6	1	..	1	1
Puerperal Fever ..	5	..	..	..	..	5	..	1	..	1	1	..	..	..	.	1	1	..	..	..
Erysipelas	5	1	..		..	2	2	..	1	1	1	..	..	..	.	1	..	..	1	..
Other Septic Diseases	6	2	..	..	.	3	1	..	2	..	..	..	1		1	1	..	..	1	..
Phthisis (Pulmonary Tuberculosis) ..	78	..	2	5	7	59	5	6	8	5	4	5	9	9	3	4	8	11	6	3
Other tubercular diseases	29	15	5	4	..	4	1	1	..	3	..	2	8	4	2	3	..	4	2	3
Cancer, malignant disease	63	.	1	..	1	33	28	2	6	5	3	2	9	6	9	5	5	4	7	6
Bronchitis	85	32	8	.	..	13	32	5	4	8	8	8	14	3	3	5	8	15	4	3
Pneumonia ..	87	26	21	1	2	23	14	6	13	10	12	6	5	4	2	9	5	10	5	3
Pleurisy	5	..	..	..	..	5	..	..	..	..	1	..	1	..	1	1	..	..	1	1
Other Diseases of Respiratory Organs	11	..	1	1	3	4	2	..	1	..	4	1	2	..	..	..	1	1	1	1
Alcoholism Cirrhosis of liver }	16	..	..		..	14	2	..	.	1	2	2	3	1	1	3	..	2	1	3
Venereal Diseases	6	2	2	..	..	2	..	..	1	..	..	..	5	..	..	..	..	..	.	5
Premature Birth ..	64	64	..	..	..	..	.	2	6	4	7	6	8	3	1	6	9	3	9	..
Diseases and Accidents of Parturition	6	..	..	..	2	4	.	..	..	..	..	1	2	..	..	1	2	..	..	2
Heart Diseases ..	42	..	1	.	3	29	9	3	2	1	7	4	9	3	4	2	3	3	1	7
Accidents ..	44	9	4	4	2	16	9	2	4	2	5	8	8	2	..	3	..	5	5	13
Suicides	2	..	..	..	..	2	..	..	..	..	..	1	..	..	..	1	..	..	..	..
Not Certified ..	14	10		..	..	..	4	1	4	1	..	..	3	..	1	1	..	2	1	..
All Other Causes ..	432	79	24	9	12	125	183	25	36	31	36	22	92	29	34	36	34	34	23	73
All Causes ..	1147	319	111	33	33	352	299	64	104	85	111	78	187	71	75	103	87	106	76	132

NOTES.—(*a*) The deaths of residents occurring beyond the limits of the district are included in this table, and deaths of non-residents occurring in the district are excluded.
See note on Table I. as to meaning of "Residents" and "Non-residents."

(*b*) Deaths of residents occurring in public institutions are allotted to the respective localities according to the addresses of the deceased as given by the Registrars, and in addition, are classified under "Public Institutions."

(*c*) Under the heading of "Diarrhœa" are included deaths certified as from diarrhœa, alone or in combination with some other cause of ill-defined nature; and also deaths certified as from

Epidemic enteritis ;
Zymotic enteritis ;
Epidemic diarrhœa. Summer diarrhœa ;
Dysentery and dysenteric diarrhœa ;
Choleraic diarrhœa, cholera, cholera nostras (in the absence of Asiatic cholera).

Under the heading of "Enteritis" are included those certified as from Gastro-enteritis, Muco-enteritis and Gastric catarrh, unless from information obtained by enquiry from the certifying practitioner or otherwise, there has been reason for including such deaths, especially those of infants, under the specific term "Diarrhœa."

Deaths from diarrhœa secondary to some other well-defined disease are included under the latter.

(*d*) The Deaths in Public Institutions include deaths in the Hatton Asylum and in the General Hospital, Birmingham.

Infantile Mortality.

By the Infantile Mortality is meant the number of deaths of infants under one year of age. The rate is usually estimated by comparing this number with the number of births, and calculating the number of deaths under one year per thousand births. There were 319 deaths under one year of age during the year, or 137 per thousand births. The average rate for the previous ten years has been 148.

The extent to which different diseases are responsible for deaths among infants is shown in the extended Schedule of the causes of deaths included in this Report. It will be seen that 28 are attributed to Whooping Cough, 40 to Diarrhœa, 15 to Tuberculosis, 64 to Premature Birth, 28 to Marasmus, etc., 58 to Respiratory Diseases, and in 10 the cause was not certified.

The wastage of life that occurs in the first twelve months after birth is so great that it demands the serious attention of all Sanitary Authorities.

The following Table shows, for the past twelve years, the number of deaths of children under one year of age per 1,000 births in Coventry compared with England and Wales generally:—

Year.	England and Wales.	Coventry.
1893	159	160
1894	137	157
1895	161	152
1896	148	149
1897	156	157
1898	161	200
1899	163	164
1900	154	131
1901	151	150
1902	133	107
1903	132	114
1904	146	137

The Infantile Mortality in the 76 great towns was 160; that in the 142 smaller towns was 154; and that in England and Wales, less the 218 towns, was 125.

In the last 6 years the average Infantile Mortality in England and Wales has been 146; in the previous 6 years it was 154;

there has therefore been a small diminution of this mortality in the past six years. The average rate in Coventry in the past 6 years has been 133; the average in the previous 6 years was 162; I think that this diminution may be regarded with considerable satisfaction. But it must not be lost sight of that this diminution is to a considerable extent accounted for by the favourable meteorological conditions that pertained in some recent years.

In order to see what, if any, alteration is taking place in the death rate among children under 5 years of age, I have prepared a table showing this rate in those recent years of which I have a record

Year.	Population.	Deaths under 5 years of age.	Rate per 1,000 of population.
1904	73,904	430	5·8
1903	72,684	399	5·3
1902	71,475	319	4·4
1901	70,300	451	6·4
1900	70,075	448	6·4
1899	61,796	450	6·8
1898	61,555	516	8·3
1897	61,234	399	6·5
1896	59,151	355	6·0
1895	56,000	350	6·2
1894	55,300	384	7·0
1893	54,700	312	5·7
1892	54,000	273	5·0
1891	52,720	389	7·3
1890	49,500	314	6·3
1889	48,500	366	7·5
1888	47,500		
1887	46,500		
1886	45,500	366	8·0
1885	45,000		
1884	44,500	379	8·5

This table shows that in the last 8 years the death rate per thousand of the population of children under 5 years of age has been 6.2, and in the previous 8 years 6.3. Among the general population the corresponding rates have been 16.7 and 17.5 respectively. It is clear therefore that the diminution that has taken place in the general death rate is not owing to any great extent to the saving of child life.

I brought this matter of Infantile Mortality before the attention of your Sanitary Committee during the year, with a view to seeing whether some method could not be devised whereby the mothers of infants might be placed in possession of some hints concerning the proper feeding of young children. There is no doubt that a large amount of ignorance or carelessness prevails on this matter. In some towns the course is taken of sending a female health visitor to all of the smaller houses where children are born, to give hints concerning the proper methods of feeding; in the absence of a health visitor it was not possible to adopt this method. By the authority of your Committee I made arrangements with the District Registrars of Births to supply me with a weekly list of the names and addresses of all births; being provided with these it is now possible to send to or deliver at these houses printed hints on this matter. This plan is now in operation. I obtained the kind co-operation of one or two of the medical men in practice in drawing up these hints. The following is a copy of the circular which is now distributed :—

PUBLIC HEALTH DEPARTMENT,
10, HAY LANE, COVENTRY.

DEAR MADAM,

The Sanitary Committee has instructed me to distribute or send to all houses, where births occur, a leaflet containing hints on the feeding of infants. It is possible that in many instances, where these leaflets may be distributed, the mother has already received, or is receiving, directions from a medical man as to the best method of feeding the child. Such personal advice should be more valuable than any printed instructions, and in these instances the accompanying hints are unnecessary. Where, however, this personal advice is not at hand, mothers or others feeding children are recommended to read the accompanying hints.

I am,
Yours faithfully,
E. H. SNELL, M.D.,
Medical Officer of Health.

Hints on the Feeding of Infants.

BREAST FEEDING.

" An infant's most natural and best food is the mother's milk, therefore an attempt should always be made to rear it by breast feeding. If the breast milk is sufficient in quantity, the infant requires no other food up to the age of six months.

The infant should be put to the breast every two hours during the day and every four hours during the night for the first three months of life; after that the intervals should be gradually made longer.

The more regular the times of feeding the better will the infant thrive.

As far as possible the quantity of milk at each feed should be the same. Regularity in the times of feeding and the amount of milk taken, *if persevered in,* will do more than anything else to prevent indigestion, flatulence, or wind, which is the common complaint of a crying and fretful baby. It is a bad habit to put the child to the breast simply to make it quiet. Irregular feeding of this kind brings on indigestion or makes it worse.

No child should have the breast after nine months. Even before that the milk becomes poor, ceases to give enough nourishment to the child, and renders the mother weak and more liable to illnesses of various kinds.

ARTIFICIAL FEEDING.

The best substitute for breast milk is fresh cow's milk suitably prepared. The same food does not suit all infants, but fresh cow's milk should always be patiently tried before anything else. Milk-fed children have a clear skin and good colour, their bones are harder, and their teeth grow better than do those of children reared on the numerous " Infants' Foods."

Cow's milk by itself is too strong for children under seven months.

Infants under a month old should be fed every two hours. Each feed should consist of one table-spoonful of new milk, two table-spoonfuls of water, with half-a-teaspoonful of Demerara sugar. If fresh cream can be obtained, add a tea-spoonful to each feed. From the end of the first to the end of the third month the child should be fed every 2½ hours during the day, and once, or at most twice in the night. Later on the milk should be given stronger, and in the third month each feed should consist of three table-spoonfuls of fresh milk, the same of boiled water, a little sugar, and, if possible, two tea-spoonfuls of cream. After the third month the quantity of water added to the milk should be gradually lessened, so that at the end of the sixth month the child takes the milk as it comes from the dairy, and with an interval of 3 or 3½ hours between the feeds.

All the milk should be boiled before use. As soon as it comes into the house it should be put into a clean jug, and the jug placed in a saucepan of cold water on the stove. When the water boils the milk has been made hot enough.

The best bottle is the boat-shaped one with an opening at each end, on one of which the teat is fitted without any tube.

Never use a bottle with a long tube.

The bottle when not in use should be put into a bowl of water containing a little washing soda, and the rubber teat into a cup of clean water without soda. Keep every vessel used in preparing the child's food scrupulously clean.

" Comforters " or dummy teats are best avoided.

If after carrying out the above directions carefully and patiently, the child does not appear to thrive, vomits or cries with pain after its food, or is troubled with diarrhœa or constipation, it is better to consult a medical man before you make any change in the food."

There will be a statistical advantage in obtaining these weekly returns of births. Your Authority will now be in possession of information concerning the distribution of the births in the different wards; a comparison will therefore in the future be possible in the infantile mortality rates in the different wards. In the past this information has been absent, for the reason that the only information obtained by your Authority was the sum total of the births which took place, or rather were registered, weekly in the whole City.

It is somewhat odd that not only these returns but also the returns of deaths and the causes of death have to be purchased by a sanitary authority from an officer appointed by another authority. Without such payment a sanitary authority is without any information concerning any one birth or death occurring in its area. I quote from " The Lancet," March 4th, 1905, on this subject:—" It is one of the anomalies of our modern methods of local self-government, that, after considerable circumlocution, public bodies have to obtain at a price from local registrars facts which have already been gleaned at the expense of the public. Thus, at present, the medical officer of health must pay considerable sums of money out of the local rates in order to discover and to classify the causes of death of citizens within his district."

Zymotic Disease.

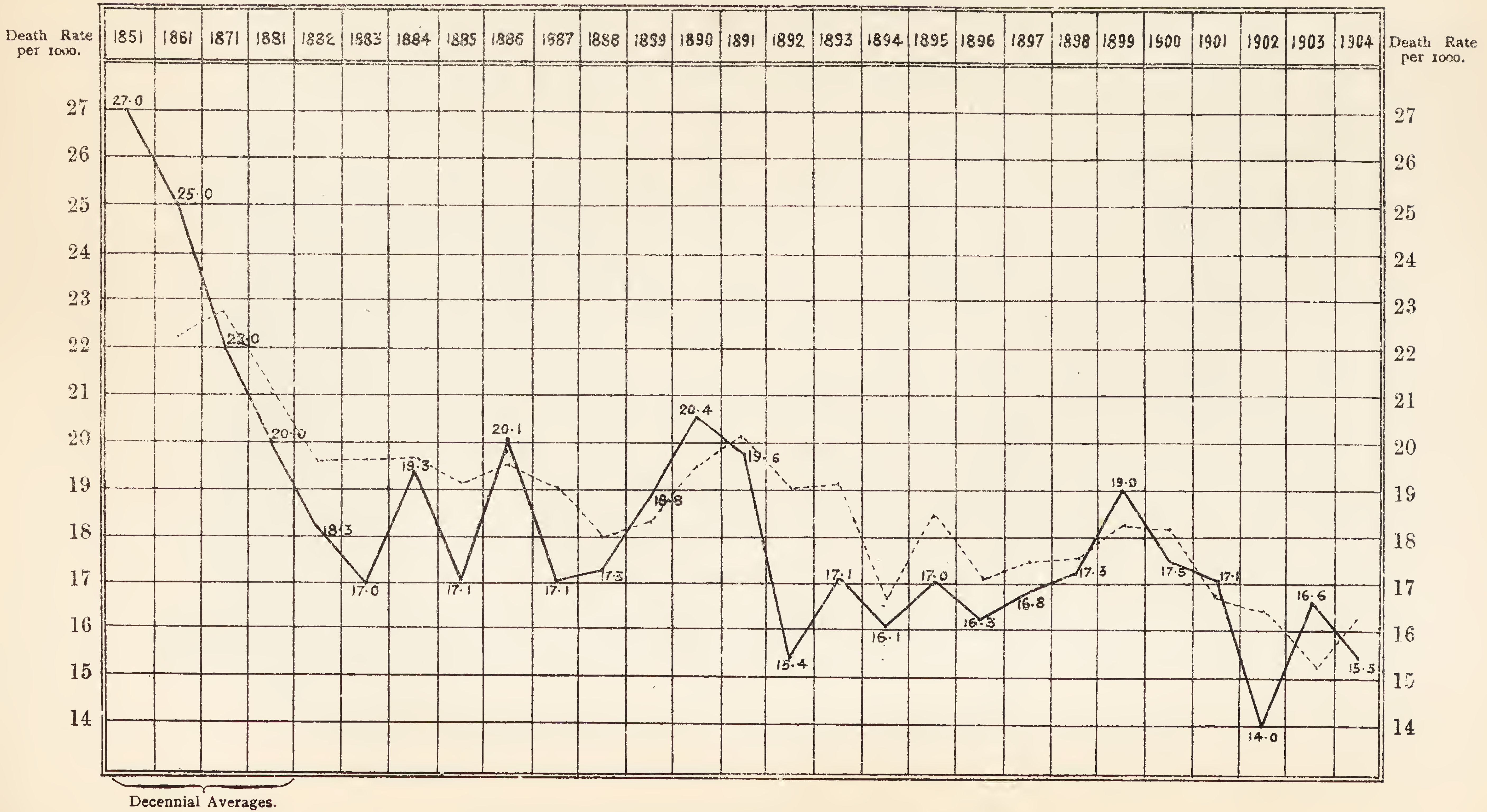
By the Zymotic Death Rate we understand the number of deaths per thousand of the population which are due to the seven common epidemic diseases. The numbers of these were as follows :—

	Notified.	Died.	Case Fatality per cent.
Small Pox	4	1	(see text)
Scarlet Fever	222	10	4.5
Diphtheria	78	11	14.1
Typhoid Fever	25	1	4
Measles	—	0	
Whooping Cough	—	48	
Diarrhœa	—	49	
		120	

This corresponds to a Zymotic death rate of 1.6. The average for the previous ten years has been 2.0. The proportion of this rate attributable to each of these seven diseases is shown below, together with a comparative statement of the similar figures for the rest of the country.

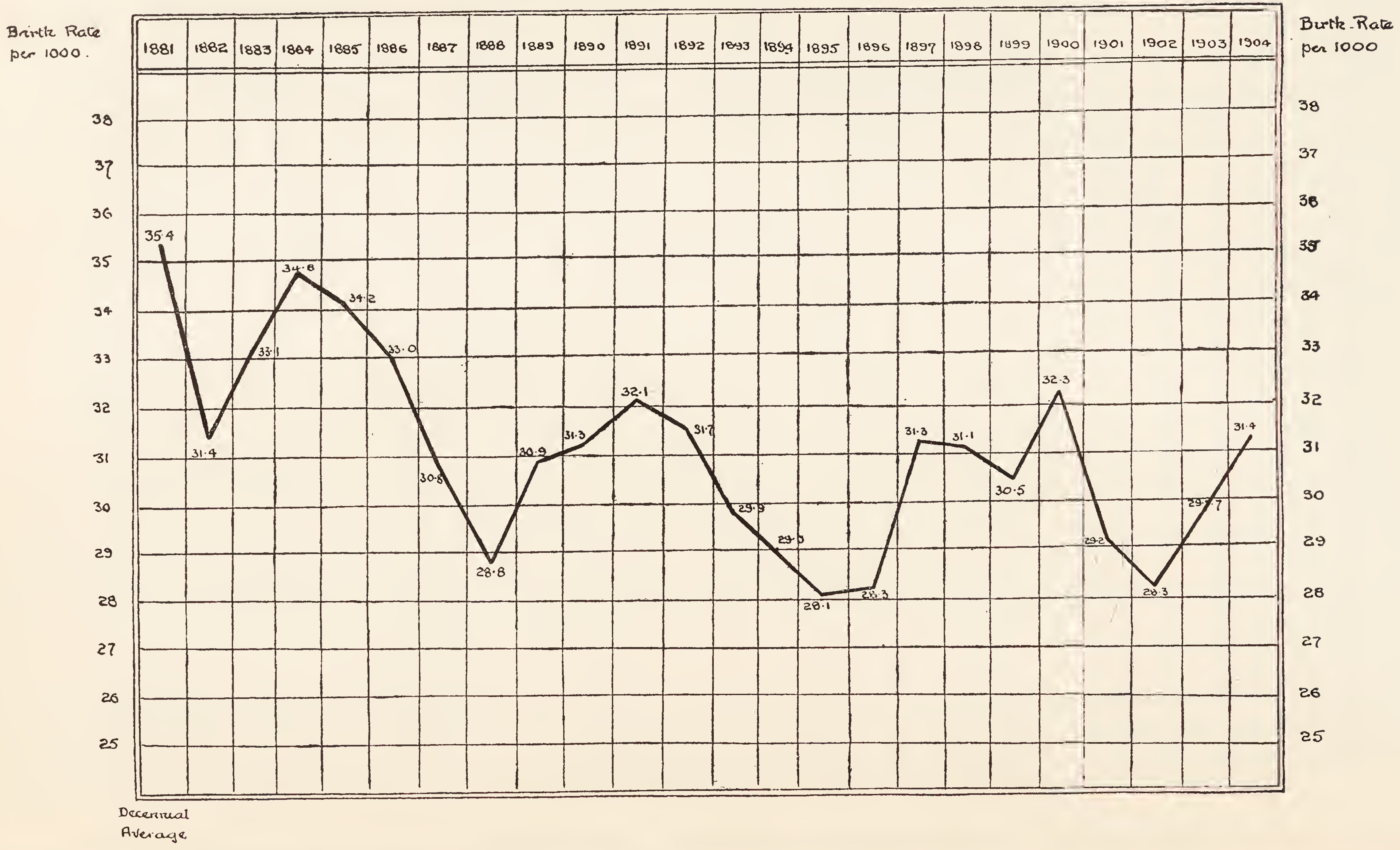
	Coventry	England and Wales.	76 Great Towns.	142 smaller Towns.	England and Wales less the 218 Towns.
Small Pox	0 01	0·01	0·01	0·03	0·01
Scarlet Fever	0·13	0·11	0·12	0·13	0·09
Diphtheria	0·14	0·17	0·19	0·16	0·14
Typhoid Fever	0 01	0·09	0·10	0·10	0·08
Measles	0·	0·36	0 47	0·36	0·23
Whooping Cough	0·65	0·34	0·40	0·35	0·27
Diarrhœa	0·66	0·86	1·20	0·89	0·46
	1·60	1·94	2·49	2·02	1·28

CHART SHEWING DECLINE OF COVENTRY DEATH RATE SINCE 1851.



Dotted line indicates Death Rate for England and Wales.

CHART SHOWING DECLINE OF COVENTRY BIRTH RATE SINCE 1871.



It will be seen from the above very instructive table that with the single exception of Whooping Cough the local death rates from all of these diseases compares very favourably with those of the rest of the country.

Whooping Cough is unfortunately a disease over which no action of the Sanitary Authority can conceivably have much influence.

Deaths from the seven principal Zymotic Diseases which have occurred in Coventry during the past 35 years: —

Year.	Small Pox.	Typhoid Fever.	Diphtheria	Scarlet Fever.	Measles.	Whooping Cough.	Diarrhœa.
1870	..	..	1	18	15	9	84
1871	166	..	5	5	18	35	59
1872	57	..	2	8	5	15	77
1873	..	..	9	15	18	28	45
1874	..	..	11	149	5	7	45
1875	..	4	7	16		16	61
1876	..	9	2	30	19	25	28
1877	..	2	2	19	3	3	24
1878	..	8	8	20	14	24	47
1879	..	2	2	7	18	18	24
1880	..	3	3	36	6	10	96
1881	1	5	11	58	2	8	24
1882	..	10	2	17	17	4	18
1883	..	7	..	2	3	5	35
1884	..	5	..	3	18	29	50
1885	..	2	1	10	..	2	20
1886	..	14	..	18	49	31	49
1887	..	7	2	14	..	9	40
1888	..	3	..	6	1	14	25
1889	..	2	1	13	50	8	38
1890	..	4	5	2	1	3	45
1891	..	7	1	..	36	15	29
1892	..	9	..	..	4	4	30
1893	..	9	1	..	..	7	44
1894	1	6	3	13	54	25	15
1895	..	5	3	19	3	20	61
1896	..	12	3	9	35	8	44
1897	..	3	4	6	16	6	80
1898	..	6	5	10	29	4	131
1899	..	18	5	3	13	39	63
1900	..	6	22*	17	50	2	75
1901	..	15	31*	18	3	32	83
1902	..	6	31*	10	..	9	28
1903	3	2	34*	5	57	15	34
1904	1	1	11*	10	..	48	49
	229	192	228	586	563	537	1700

* The Deaths from Membranous Croup are here included.

Epidemic Diarrhœa.

During the year 35 deaths have been certified as due to Epidemic Diarrhœa, and 14 to Diarrhœa, making a total of 49 deaths due to this cause. Reference to the table on page 33 will show that this number is greater than it has been in the last two years, but is less than it was in several preceding years.

I have dealt fully with the known causes of this disease in previous reports.

The four-foot earth thermometer at the Meteorological Station at the City Hospital exceeded 57° from the second week in July until the last week in September. During these weeks 40 out of the above-mentioned 49 deaths took place.

The dependence of this disease on long spells of hot dry weather has been so fully demonstrated that it may perhaps be supposed that the prevention of it is beyond human power. It seems certain, however, that much may be done towards its prevention by taking every measure which will help to secure a pure food supply for infants, in other words, by securing a pure milk supply and preventing its contamination during its period of storage in the home.

To boil, or sterilize all milk given to children during the summer months would be a valuable safeguard. In some towns the equivalent of this is done by the municipal sale of sterilized milk. One of the weak points of this system is that it is only the already careful mothers who are likely to go to the trouble and expense of sending regularly for this supply; it is not among the children of such that the greatest diarrhœal mortality may be expected.

It is among bottle-fed infants that the disease is the most fatal. Dr. Hope, the Medical Officer of Health for Liverpool, has shown that the incidence of death is 15 times greater among children under three months of age who are bottle-fed than it is among an equal number of children who are breast-fed. His figures were 20 deaths per 1,000 breast-fed infants, against 300 deaths among 1,000 bottle-fed infants.

It may be hoped that the system now introduced of distributing leaflets concerning the proper method of feeding infants may have some influence on the mortality from this disease.

Measles.

No deaths were attributed to Measles during the year. The great fluctuations that occur in the mortality from this illness is well shown in the table on page 33. The fact that no deaths were attributed to it is rather astonishing, when it is considered that no less than 214 cases of the disease were notified from schools. This is a large number of cases to occur without any deaths.

The usual lists of Precautions were distributed at all houses where the disease was known to exist.

Scarlet Fever.

Two hundred and twenty-two cases of this disease were notified during the year, and 10 deaths were registered as due to it. The distribution of the cases is shown on the map at the end of this Report; the comparison of these figures with previous years is given in the tables on pages 36 and 33.

Of the 222 cases notified 197 were admitted to the City Hospital, or 88.7 per cent of those notified were isolated.

In the 15 years prior to the compulsory notification of infectious disease, the average mortality in Coventry from this disease was .42 per thousand of the population; in the 15 years that have now elapsed since that date the average mortality has been .12. The disease is a more mild one than it formerly was; most cases are indeed trivial from the point of view of serious illness. Whether this is the only cause of the diminished mortality is a matter of some doubt.

The enquiries which have been made concerning each case, the leaflets of precautions which have been distributed at those houses where cases of the disease have been nursed at home, the disinfection measures, and the prevention of school attendance of members of the same family, have been the same as has been stated in previous reports.

The comparison of the year as regards the fatality of cases, the removals to hospital, and the mortality from this disease are given on page 36.

Comparison of Scarlet Fever Cases, Removals to Isolation Hospital and Deaths from Scarlet Fever.

Year.	Estimated Population	Total No. of cases notified.	No. of deaths regist'rd	Fatality per cent.	No. of cases treated in Hospital	Attack rate per 1000pop.	Mort'lity per 1000 population.	Per centage removed to Hospital
1875	39,446		16		12		·40	
1876	39,890		30		22		·75	
1877	40,344		19		36		·47	
1878	40,778		20		34		·49	
1879	41,222		7		46		·16	
1880	41,666		36		90		·86	
1881	42,111		58		156		1·37	
1882	42,750		17		47		·39	
1883	44,000		2		26		·04	
1884	44,500		3		30		·06	
1885	45,000		10		97		·22	
1886	45,500		18		84		·39	
1887	46,500		14		142		·32	
1888	47,500		6		162		·12	
1889	48,500		13		176		·26	
1890	49,500	67	2	3·0	58	1·35	·04	86·5
1891	52,724	42	0	·0	37	·79	·0	88·0
1892	54,000	38	0	·0	27	·70	·0	71·0
1893	54,700	33	0	·0	25	·60	·0	75·7
1894	55,300	385	13	3·3	319	6·96	·23	82·8
1895	56,000	439	19	4·3	408	7·66	·33	92·9
1896	59,151	313	9	2·9	288	5·29	·15	94·2
1897	61,234	221	6	2·7	216	3·60	·09	97·7
1898	61,555	278	10	3·6	266	4·5	·16	95·3
1899	61,796	188	3	1·6	183	3·0	·04	97·3
1900	70,075	637	17	2·5	609	9·09	·24	95·6
1901	70,300	781	18	2·3	384	11·1	·25	49·1
1902	71,475	245	10	4·0	211	3·4	·14	86·1
1903	72,684	121	5	4·1	110	1·6	·06	90·9
1904	73,904	222	10	4·5	197	3·0	·13	88·7

Small Pox.

There were two known introductions of this disease during the year, and five cases of the disease arose.

Some particulars of these cases are given below :—

(1). C. C., a man aged 43, staying in a common lodging-house; it appeared that he contracted the infection in Yorkshire; he tramped to Coventry, staying in common lodging-houses or sleeping out on the way; he arrived in Coventry on March 26th, and says that he first saw a rash on that day; the case was notified on the 28th, and he was removed to the Pinley Hospital on the same day. No subsequent case was traced to this introduction.

Vaccinated in infancy ; 1 or 2 doubtful scars ; ? area ; very mild attack.

(2). J. H., a man aged 33, whose home was at Brandon. Illness was said to have commenced on May 21st, and the rash was said to have been seen on the same day; wishing to have a medical opinion concerning the nature of his rash, he journeyed to Coventry by train early on the morning of May 23rd (Whit Monday), and after some loitering about he went to the Coventry and Warwickshire Hospital, where I saw him early in the afternoon, and he was from there removed to the Pinley Hospital.

Vaccinated in infancy ; 4 marks ; $1\frac{5}{8}$ sq. inch ; mild attack.

(3). On June 2nd, exactly 11 days after the arrival in the City of J. H., a patient, E. W., aged 23, an in-patient of the City Hospital, who was admitted to that institution 16 days previously, became ill, and showed a Small Pox rash on June 4th. The origin of this illness was obscure; the incidence of the dates and the absence of any other known source rendered it probable that the infection was in some way derived from Case 2. The infection could not have been contracted after May 23rd; minute enquiries with the object of ascertaining in what way the infection could have been conveyed, and the movements of everyone who had entered the ward on that date were investigated; I had myself visited the City Hospital before seeing J. H., and not afterwards; no method by which the infection could have been conveyed could be discovered; it was only possible to conclude that the conveyance must have been brought about by some third person, who had come into contact with Case 2 while he was loitering about, and had conveyed the infection into the City Hospital. Or, again, it is conceivable that the infection might have been conveyed in this way from an undiscovered case present in the City on the Bank Holiday. The other patients in the same ward who were not considered sufficiently protected by vaccination were vaccinated, and no further spread of the infection occurred. The patient herself was removed to the Pinley Hospital.

Vaccinated in infancy ; 2 marks ; $\frac{3}{4}$ inch ; medium attack.

(4). J. F., aged 23, the Assistant House Surgeon at the Coventry and Warwickshire Hospital who had seen J. H. at that Hospital, and who was not re-vaccinated, became ill on June 3rd, and the rash appeared on June 5th.

Vaccinated in infancy ; 2 marks ; $\frac{5}{8}$ inch ; very mild attack.

(5). T. B., a man aged 31, a friend of Case No. 2, visited him at Brandon on May 22nd, after the rash had appeared, and then returned to his home at Coventry; he became ill on June 4th, and the rash appeared on June 8th.

Vaccinated in infancy ; 1 mark ; $\frac{1}{4}$ inch ; very mild attack.

These were the only cases of Small Pox admitted to the Pinley Hospital from the City. One case of Catarrh that was notified from a lodging-house as possibly incipient Small Pox was admitted and kept under observation for a few days. All of these cases recovered. It will be noted in the classified causes of deaths that one death is ascribed to Small Pox; this was the case of a man whose home was in Coventry, and who while away from the City contracted Small Pox, was isolated in a rural hospital throughout his illness, and was discharged; subsequently, after his return, he became ill with Nephritis and died; his medical attendant, considering that the Nephritis owed its origin to the attack of Small Pox, inserted that as the primary cause of the death.

Vaccination.

The following are the returns of the Vaccination Officer for the fourteen years that have elapsed since the commencement of the anti-vaccination movement in Coventry.

Year.	Births.	Deaths Unvaccinat'd	Vaccinated.	Unvaccinat'd	Percentage Vaccinated
1889	1512	187	1273	0	84·1
1890	1544	182	1221	111	79·0
1891	1727	228	587	888	34·0
1892	1718	174	118	1400	6·8
1893	1630	193	105	1304	6·4
1894	1590	170	103	1317	6·4
1895	1629	186	65	1378	3·9
1896	1679	251	594	834	35·3
1897	1928	220	151	1606	7·8
1898	1925	274	105	1545	5·4
1899	1888	203	1125	560	59·5
1900	2207	211	946	1050	42·8
1901	2112	247	1298	567	61·4
1902	2046	180	2076	666	101·4
1903	2169	167	2525	525	116·4
1904	2306	242	1901	532	82 4

These returns refer to the whole Registration District, and therefore include figures relating to the Coventry Rural District. Further, it must be noted that though the births registered go to the end of each year, the vaccinations refer in recent years to births which took place in the last four months of each preceding year and the first eight months of each current year, and also to some extent to vaccinations among children left unvaccinated in previous years. This accounts for the apparent discrepancy in 1902 and 1903, when there were more vaccinations than births.

Mr. Montague Wilks, the Clerk to the City Justices, has kindly informed me that during the year 219 applications for exemption from vaccination were made to the Magistrates, and that 219 certificates were granted. The following are the comparative figures for the six years during which the Vaccination Act of 1898 has been in force.

	Applications made.	Certificates granted.
1898 (last half)	981	976
1899	70	70
1900	163	162
1901	163	159
1902	207	207
1903	231	231
1904	219	219

The reasons why the number of births does not tally with the numbers given in the other columns are given above. As the figures stand they must be regarded as very satisfactory. It will be seen that no less than 82 per cent. of those born are vaccinated; 10 per cent. of those not vaccinated are accounted for by deaths before vaccination; while 9 per cent. are accounted for by the number of exemptions obtained; nothing more satisfactory under the present system of non-compulsory vaccination can be expected. When an epidemic of Small Pox is present, experience shows that the numbers of those vaccinated are swelled by vaccinations among older children who have escaped vaccination in previous years.

Typhoid Fever.

Twenty-five persons were notified during the year as suffering from Typhoid Fever. Twenty of these were admitted into the City Hospital. After admission it was only considered that 14 out of the 20 cases were really Typhoid Fever; 1 was considered to be suffering from Endocarditis, 2 from Gastric Catarrh, 1 from Empyema (this patient was transferred to the Coventry and Warwickshire Hospital), and 2 from Pneumonia. One of the 14 patients died; this was the only death from Typhoid Fever in the City during the year. The comparison of the year's record of Typhoid Fever with previous years is given in the table on page 33.

The desirabilitv of always having sufficient Hospital accommodation for cases of Typhoid Fever I have always insisted on;

it is a disease which is readily spread among those who are brought into contact with patients in domestic dwellings; further, the chances of recovery in Hospital are greater than they are when the patient is nursed at home, except in the case of a home where every attention in the way of nursing, etc., can be readily obtained. The percentage of recoveries at the City Hospital has been singularly fortunate during the past few years; since September 15, 1899, 101 cases of this disease have been admitted to that hospital with only one death.*

During the year 8 beds (in the Iron Hospital) have been reserved for this disease.

Diphtheria.

In my report for 1903 I stated my opinion that the heavy incidence of Diphtheria, which had been present for three years, would lessen; I am glad to be able to say that this has been the case, and that the number of cases of this disease which have been notified in 1904 has only been one-half of the annual average for the previous three years. The numbers of cases notified have been 74 of Diphtheria, and 4 of Membranous Croup. Eleven cases proved fatal. The comparison of these figures with those of previous years is shown in the table on page 33.

Regarding the free supply of Serum for the treatment of cases of Diphtheria, I reported to your Sanitary Committee the results of its use in 1904 as follows:—

"Since 1902 your Committee have placed a free supply of Anti-Diphtheritic Serum at the disposal of medical men in the City for the treatment of their cases of Diphtheria.

I now present a statement concerning the serum supplied and the cases in which it was used in 1904.

During 1904, 78 cases of Diphtheria and Membranous Croup were notified and 11 deaths occurred. This shows a considerable diminution of the prevalence of the disease as compared with the three previous years, when the figures were:—

Year.	Cases	Deaths.
1901	139	31
1902	157	31
1903	140	34
1904	78	11

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* Some notes on this series of cases have recently been published in "The British Medical Journal."

Applications for serum were made at the City Hospital in 42 instances. Reports concerning its use in 39 cases have been received; and in the other cases I have written to the medical practitioners concerned, and have pointed out the fact that on the institution of the free supply of serum in 1902, your Committee laid it down that the continued supply would be conditional on the return of the reports concerning its use and effects.

Of the 39 reports received the dose of serum has varied; in 17 cases 2,000 units were employed; in 20 cases 4,000 units; in 1 case 8,000 units, and in 1 case 12,000 units.

The summary of the results is given below:—

Days of Illness before use of Serum.	Cases.	Deaths.	Percentage of Deaths.
1	19	0	0
2	9	2	22%
3	6	2	33%
not stated	5	0	0

So that in 19 cases where the serum was used on the first day of the illness, no deaths occurred; in 9 where it was used on the second day, 2 deaths occurred; and among 6 where it was not used until the third day, 2 deaths occurred.

Only 4 deaths occurred among the 39 cases where the serum is known to have been used; while 7 deaths occurred among the 39 other patients of whom we have no record as regards the treatment employed; though in all probability serum was not used for more than a very small number of them.

These figures are small, and are therefore not of much value. But it has been conclusively proved that if the use of serum is adopted early in the disease the risk of a fatal ending is much reduced."

One other matter in connection with the dealing with, and if possible the diminution of, this disease, I have often adverted to in my reports; it is the importance of recognizing cases of this disease in their early stage. This is not only of import from the point of view of taking precautions against the spread of the disease to others, but also as has already been shown, from the point of view of the successful treatment of the illness. The step which I have recommended is one which has been adopted in a large number of other districts; in fact, in the County of Warwickshire, the City of Coventry is the only spot where the procedure has not been adopted. The procedure I refer to is the placing at the disposal of medical men in practice facilities for the assistance of a bacteriological examination in their cases of Diphtheria; many cases of the disease are excessively difficult to diagnose in their early stages; assistance may be derived from a bacteriological examination; it would only rarely be possible for the medical man in practice to have the facilities for this, even if he had the leisure and the necessary technical training. The course which has been adopted in other districts has been to make an arrangement with some established bacteriological laboratory to undertake this work, and to place the assistance of this laboratory at the disposal of the medical practitioners; in some few of the larger towns a municipal laboratory has been started; this would not be necessary unless the amount of the work was large.

Whooping Cough.

Forty-eight deaths were registered as due to Whooping Cough; of these, 28 were among children below one year of age, and 20 were among those between twelve months and two years. This is the largest number of deaths attributed to this disease in any one year among recent years.

Two hundred and thirty cases of this disease were notified from schools; among these children attending school no deaths occurred; the figures show in a striking way how fatal the disease may be among children under two years of age, and how non-malignant the disease becomes among older children; it is therefore of the greatest importance to keep very young children away from any possible source of infection. Among very young children the disease should always be looked upon as a serious illness, and medical attention be obtained from the onset.

Erysipelas.

Sixty cases of this disease were notified, and 5 deaths were attributed to it.

In March five cases of this disease occurred among in-patients of the Coventry and Warwickshire Hospital, one of the patients succumbing to the illness; as it is peculiarly undesirable that patients with this disease should be among surgical cases, four of them were transferred to an empty ward at the City Hospital,

Puerperal Fever.

Nine cases of this disease were notified, and 5 deaths were attributed to it.

In the course of time the effect of the Midwives' Act, 1902, must be that the totally untrained midwife will disappear and give place to those who have received some recognized course of training; it can therefore be confidently hoped that the number of cases of Puerperal Fever will be still further reduced. In the past any woman, with or without any qualifications, experience, training, knowledge, or aptitude, could call herself a midwife, and act as such. By the Midwives' Act this is now altered, and in the future only those who obtain a recognized certificate in midwifery will be allowed to be registered as midwives.

Tuberculosis.

During the year 78 deaths were attributed to Phthisis, and 30 to other forms of Tuberculosis, making a total of 108 deaths as due to this disease.

The table on page 46 shows how these figures compare with those of the previous 30 years. It indicates clearly the gradual decline which has been taking place in the death rate from this disease during this time. It also shows that the death rate from this disease has been lower in the past year than in any previous year on record.

It may be confidently anticipated that every sanitary improvement in and around dwelling houses will have a tendency to lessen the liability to this disease. Particularly may this be thought to be the case with all improvements which increase the light and ventilation accessible to dwellings. There is still one further step in this direction in which much remains to be done, and that is to teach people to make use of this light and ventilation; the Gospel of the Open Window is one which needs much preaching. Probably it is in the smallest and most overcrowded houses where the least advantage is taken of windows. In 1900 Mr. Rowntree, in York, had observations made in 2,480 houses in working class districts in order to ascertain how far the evils of the smaller and most overcrowded houses were lessened by ample ventilation; these observations on the windows were made in the middle of the night; open windows were found in only 5 per cent. of the number. The prejudice against the admission of " night air " is one which is answerable for countless deaths; and until this prejudice can be dispelled the death roll from this disease will continue to lengthen.

It remains for me to mention those measures which have been adopted with a view especially to the prevention of this disease. Each week the death returns are gone through, and all returns of deaths which, from the certified cause of death, suggest or intimate that the cause of death was some infectious form of Tuberculosis, are selected, and the premises are visited. Certain particulars are obtained concerning the length and character of the illness, etc. ; the bedding and clothes of the deceased are taken away, disinfected, and returned, except in a very small number of cases where the friends object to this course; the particulars of each case are reported to me, and it is then determined in each case what amount or kind of disinfection is required; in most cases this includes some limewashing, and papering of rooms, and the scrubbing of the floors with disinfectants; for this last purpose Chloride of Lime in water is recommended; in some cases it is not considered necessary to strip the walls of paper and re-paper, but the rubbing down of the paper on the walls with dough is considered sufficient; where any limewashing or similar cleansing is required, I present a certificate to this effect to your Sanitary Committee, under Section 46 of the Public Health Act, 1875, and on the order of that Committee the owner or occupier is called on to carry out this work. During the year these enquiries have been made in 76 instances, and some amount of disinfection has been done in all of these cases.

Some of the particulars obtained in these cases are instructive :—

Concerning the occupation of those who died from this disease, the numbers in the several occupations were as follows: Housewives, 21; cycle-machinists, 13; children, 10; watchmakers, 7; publicans, 4; bootmakers, 2; weavers, 2; carpenters, 2; and one each of the following: printer, draper, broker, clerk, gardener, labourer, painter, tailor, hosier, sweep, electrician, traveller, civil engineer, gas-fitter, and time-keeper.

Concerning the duration of the illness, this varied considerably; in 25 it was under one year in duration; in 26 from one to two years; and in 25 over two years.

The cough had lasted—according to the history obtained—in 12 cases for over two years, in 20 cases from one to two years,

Deaths from Tuberculosis during the last 31 years.

Year.	Estimated Population.	Phthisis.	Phthisis. Death Rate.	Other forms of Tuberculosis.	Totals.	Tuberculosis. Death Rate.	Averages. Tuberculosis. Death Rates.
1874*	39,000	38	1·94	12	50	2·56	2·53
1875	39,446	83	2·14	34	117	2·96	
1876	39,890	70	1·76	22	92	2·30	
1877	40,344	66	1·63	29	95	2·35	
1878	40,778	84	2·06	13	97	2·37	
1879	41,222	89	2·15	22	111	2·68	
1880	41,666	78	1·87	36	114	2·74	2·15
1881	42,111	65	1·54	28	93	2·20	
1882	42,750	62	1·47	22	84	1·96	
1883	44,000	74	1·78	15	89	2 02	
1884	44,500	82	1·84	18	100	2·24	
1885	45,000	72	1·60	16	88	1·74	
1886	45,500	60	1·31	13	73	1·60	1·93
1887	46,500	70	1·50	25	95	2 04	
1888	47,500	61	1·28	15	76	1·60	
1889	48,500	103	2·12	11	114	2·33	
1890	49,500	91	1·84	21	112	2·26	
1891	52,724	78	1·47	14	92	1·74	
1892	54,000	79	1·46	33	112	2·07	1·82
1893	54,700	70	1·28	30	100	1·82	
1894	55,300	73	1·32	32	105	1 88	
1895	56,000	70	1·25	27	97	1·73	
1896	59,151	86	1·45	19	105	1·78	
1897	61,234	69	1·12	33	102	1·66	
1898	61,555	64	1·03	28	92	1·49	1·74
1899	61,796	85	1·37	29	114	1·84	
1900	70,075	105	1·49	36	141	2·01	
1901	70,300	83	1·18	35	118	1·67	
1902	71,475	81	1·17	39	120	1·67	
1903	72,684	87	1·19	43	130	1·78	
1904	73,904	78	1·05	30	108	1·46	

*Latter half of year only.

in 42 cases it had been of less than a year's duration, and in two cases there was said to have been no cough.

The confinement to bed in 30 cases was a week or less; in 12 instances it was over one week and less than three weeks; in 34 cases it was over three weeks; in two of these it amounted to five months.

The rent of the houses occupied is some indication of the size, and therefore of the airiness of the houses; in 8 instances the houses occupied were of rentals of over £20; in 15 cases it varied from 6s. 6d. to 8s. per week; in 27 cases it was from 4s. 6d. to 6s.; and in 26 cases it was under this amount.

A similar feature is brought out by the number of bedrooms in the houses; in no less than 34 houses the bedrooms numbered either one or two; in 31 houses there were three bedrooms; in 8 instances there were four bedrooms; in two instances five bedrooms; and in one instance six bedrooms.

In no less than 17 of the fatal cases the house was not through-ventilated.

Cancer.

During the year 63 deaths have been registered as due to different forms of malignant disease. In the death returns these were designated as follows:—

Malignant disease	15
Cancer	7
Carcinoma	28
Epithelioma	8
Sarcoma	4
Scirrhus	1

The frequency with which the different parts of the body were affected was as follows:—Pancreas, 1; Intestines, 5; Breast, 6; Liver, 8; Rectum, 6; Larynx, 2; Bladder, 1; Neck, 1; Stomach, 6; Pharynx, 2; Œsophagus, 1; Abdomen, 2; Prostate, 1; Ovary, 1; Uterus, etc., 11; Shoulder Joint, 1; Tongue, 1; Face, 1; Inferior Maxilla, 1; Gall Bladder, 1; Cranium, 1; Bones, 3.

No one of the 12 wards of the City was without its deaths from this form of disease.

Much work is being done at the present time with a view to discovering the causes on which the incidence of this disease is dependent.

Other Causes of Death.

I am appending to this Report an extended schedule of the causes of, and ages at, death, of those deaths properly belonging to the district which occurred during the year. This gives more detailed information in regard to the causation of death, and is divided into smaller age groups than the table on page 26.

It will be seen that 16 deaths were registered as directly due to Alcoholism and Cirrhosis of the Liver. Other deaths are probably accelerated by the same causes, but appear in the returns under other names.

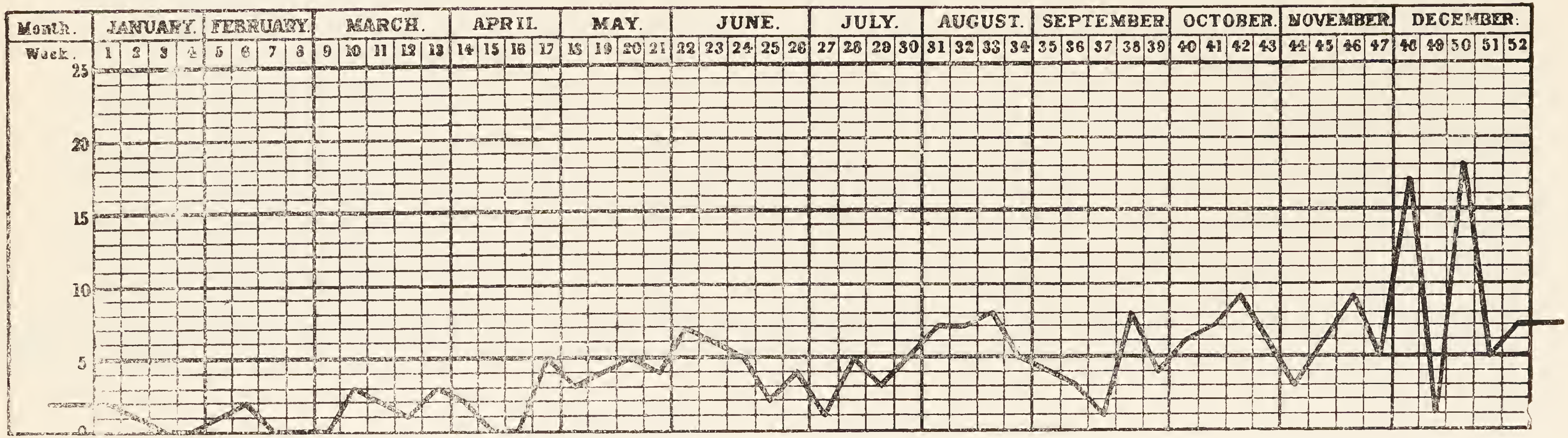
No less than 46 deaths were attributed to accident or negligence, including those due to suicide.

Uncertified Deaths.

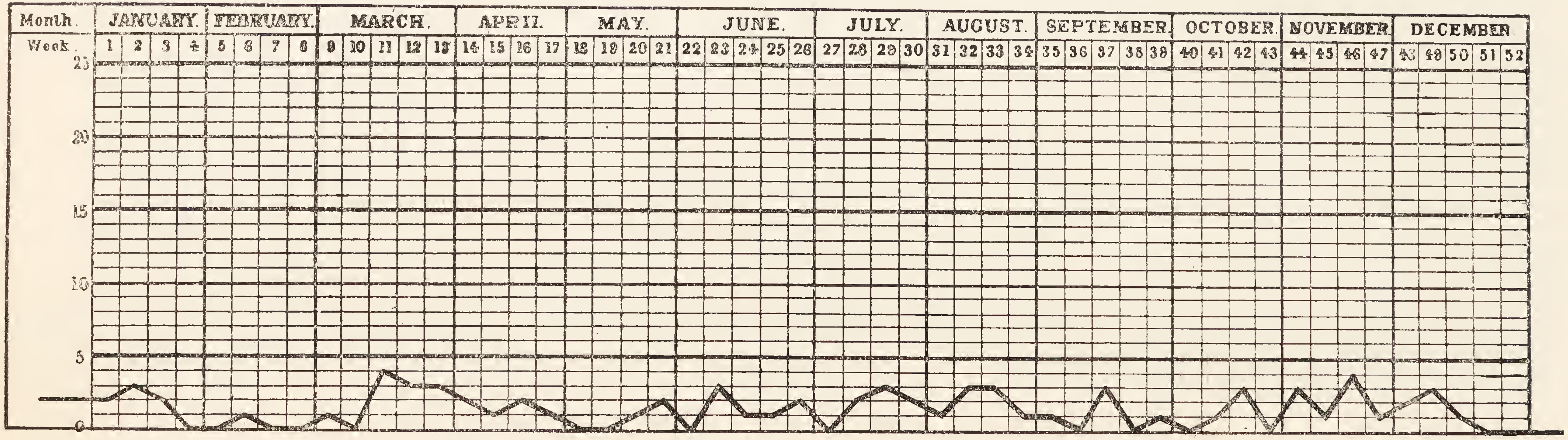
All deaths regarding which a medical certificate is not forthcoming, and concerning which no inquest has been held, are to be regarded as uncertified. Fourteen such deaths have occurred during the year. There were also 4 deaths which were certified, and the cause was so ill-defined that it has been impossible to classify them.

During the year it appears that 68 inquests have been held in the City, and that 3 of these were concerning the deaths of non-residents.

WEEKLY NOTIFICATIONS OF SCARLET FEVER 1904.



WEEKLY NOTIFICATIONS OF DIPHTHERIA 1904.



Weekly Returns under the Infectious Disease (Notification) Act.

Week Ending.	Small Pox.	Chicken Pox.	Scarlet Fever.	Diphtheria.	Membranous Croup.	Typhoid Fever.	Continued Fever.	Puerperal Fever.	Erysipelas.
1904									
January 9	..	30	2	2	..	..	..	..	1
,, 16	..	9	1	3	..	1	..	1	2
,, 23	..	31	..	2	..	1	..	..	2
,, 30	..	22	..	..	..	..	..	1	1
February 6	..	17	1	..	..	..	..	..	..
,, 13	..	33	2	1	..	..	..	..	..
,, 20	..	14	..	..	..	..	..	..	1
,, 27	..	9	..	..	..	..	..	..	2
March 5	..	10	..	1	1	..	..	..	1
,, 12	..	4	3	..	..	..	..	..	7
,, 19	..	5	2	4	1	..	..	..	3
,, 26	.	5	1	3	..	..	1	..	2
April 2	1	2	3	3	..	..	..	..	..
,, 9	..	..	2	2	..	..	..	1	1
,, 16	..	..	..	1	..	..	..	..	1
,, 23	..	..	..	2	..	..	..	..	1
,, 30	..	2	5	1	..	..	.	..	2
May 7	..	1	3	..	..	..	..	..	..
,, 14	..	..	4	..	..	1	..	1	..
,, 21	..	..	5	1	..	..	..	..	4
,, 28	1	1	4	2	..	..	..	..	..
June 4	..	..	7	..	1	..	..	..	1
,, 11	3	..	6	3	..	..	..	1	..
,, 18	..	..	5	1	..	..	..	..	1
,, 25	..	..	2	1	..	..	..	1	4
July 2	..	..	4	2	..	..	..	..	..
,, 9	..	..	1	..	..	..	..	..	1
,, 16	..	..	5	2	..	1	..	..	1
,, 23	..	..	3	3	..	2	..	..	2
,, 30	..	..	5	2	..	..	..	..	1
August 6	..	..	7	1	..	..	..	..	2
,, 13	..	..	7	3	..	..	..	..	3
,, 20	..	..	8	3	..	..	..	..	..
,, 27	..	..	5	1	..	1	..	1	..
September 3	..	..	4	1	..	..	..	..	4
,, 10	..	..	3	..	..	..	..	..	1
,, 17	..	..	1	3	..	3	..	..	..
,, 24	..	..	8	..	..	2	..	..	1
October 1	..	..	4	1	..	3	..	..	..
,, 8	..	..	6	..	..	1	..	..	..
,, 15	..	..	7	1	..	1	..	..	2
,, 22	..	..	9	3	..	1	..	1	..
,, 29	..	..	6	..	..	..	..	..	..
November 5	..	..	3	3	..	1	..	..	2
,, 12	..	..	6	1	..	3	..	..	1
,, 19	..	..	9	4	..	1	..	1	2
,, 26	..	..	5	1	..	1	..	..	5
December 3	..	..	17	2	1	..	..	..	..
,, 10	..	..	1	3	..	..	..	..	..
,, 17	..	..	18	1	..	..	..	..	1
,, 24	..	..	5	..	..	1	..	..	..
,, 31	..	..	7	..	..	..	..	..	1
TOTAL	5	197	222	74	4	24	1	9	67

Total .. 603.

The City and Pinley Isolation Hospitals.

During the year the City Hospital has been used for the isolation of Scarlet Fever and Typhoid Fever patients, and the Pinley Hospital for the isolation of Small Pox patients.

At the two hospitals 291 patients have been under treatment; 13 patients were remaining in the City Hospital at the beginning of the year; 277 were admitted during the year, one of which number was transferred from the City Hospital to the Pinley Hospital, and is counted in the tables as two patients. Of this number 245 were admitted to the City Hospital, and 33 to the Pinley Hospital. The whole were admitted from the area of the City with the following exceptions:—27 cases of Small Pox were admitted from the Nuneaton Rural District, 4 cases of Typhoid Fever were admitted from the Coventry Rural District, 2 cases of Scarlet Fever were admitted from the Rugby Rural District, and 16 were illnesses among the resident staff of the City Hospital.

During the year 380 visits were paid to the City Hospital, and 40 to the Pinley Hospital. Also, at the request of medical men, I visited 53 doubtful cases of infectious disease at their own homes prior to notification.

Particulars concerning the admissions, discharges, deaths, and diseases are given in the accompanying table :—

		Disease.	In Hospital Jan. 1, 1904.	Admitted 1904.	Total.	Recovered.	Died.	In Hospital Jan. 1, 1905.	Death Rate per cent.
City Hospital.		Scarlet Fever	12	196	209	146	8	55	5·1
		,, ,, and Diphtheria	1						
		,, ,, and Chorea	..	1	1	1	..	..	
		,, ,, and Morbilli	..	2	2	2	..	..	
		Typhoid Fever	..	18	18	14	1	3	6.6
	Admitted as Typhoid Fever	Endocarditis	..	1	1	1	..	..	..
		Gastric Catarrh	..	2	2	2	..	..	..
		Empyema	..	1	1	1	..	..	..
		Pneumonia	..	2	2	2	..	..	..
		Diphtheria	..	2	2	2	..	..	..
		Erysipelas	..	4	4	4	..	..	..
		Sick Staff	..	16	16	14	..	2	..
Pinley Hospital.		Small Pox	..	32	32	32	..	..	..
		Small Pox suspect	..	1	1	1	..	..	..
			13	278	291	222	9	60	3·8
			291			291			

The several parts of the Hospitals were open during the following lengths of time :—

City Hospital	North Pavilion	323 days.
	South ,,	366 ,,
	West ,,	125 ,,
	East ,,	146 ,,
	Iron Hospital	291 ,,
Pinley Hospital		108 ,,

The average periods of stay of those patients who were admitted during the year were as under :—

City Hospital	52.7 days
Pinley Hospital	22.7 ,,

The maximum, average, and minimum numbers of patients in the two hospitals were as under :—

	Maximum No. of Patients.	Average No. of Patients.	Minimum No. of Patients.
City Hospital	62	28.9	7
Pinley Hospital	27	6·4	0

The comparison of these figures with those of previous years is given below :—

CITY HOSPITAL.

Year.	Maximum No. of Patients.	Average No. of Patients.	Minimum No. of Patients.
1894	132	37	4
1895	99	58	30
1896	89	45	10
1897	65	33	12
1898	75	41	15
1899	86	40	16
*1900	129	88.9	45
*1901	107	58.2	30
1902	45	35	24
1903	49	15·9	3
1904	62	28.9	7

The number of beds for which the City Hospital is constructed is 62, so that at no time during the past three years has that hospital been overcrowded.

* In these years the Pinley Hospital was used as a Convalescent Scarlet Fever Hospital, and the figures relate to both Hospitals.

The following figures represent the number of patients that have been admitted annually to your Hospitals since the opening of the City Hospital in 1874:—

1874— 12
1875 - 14
1876— 22
1877— 38
1878— 54
1879— 76
1880— 90
1881—156
1882— 48
1883— 34
1884— 34
1885—101
1886—111
1887—158
1888—189
1889—210
1890— 83
1891— 91
1892— 72
1893— 65
1894—355
1895—408
1896—313
1897—234
1898—283
1899--257
1900—610
1901—405
1902—246
1903—211
1904—278

The current expenses of the City Hospital during the last financial year, ending March 31st, 1904, amounted to £1,890 8s. 4d.; those for the Pinley Hospital to £862 1s. 2d.

The character of these expenses is set out below:—

YEAR ENDING MARCH 31ST, 1904.

By City Hospital:—	£	s.	d.
Acknowledgments ..	0	10	0
Rates, Taxes & Insurance	180	6	2
Alterations, Repairs, Furniture, etc. ..	233	16	4
Telephones	6	5	0
Provisions	432	16	11
Drugs and Appliances ..	31	6	1
Drapery	39	5	1
Fuel and Lighting ..	279	8	2
Ironmongery, etc. ..	60	10	7
Carriage	1	0	8
Photographs	2	18	0
Stationery, Printing and Advertising	19	17	2
Temporary Medical Attendance at Hospital	8	8	0
Salaries & Wages of Staff	577	15	10
Wages of Gardeners ..	1	1	8
Shrubs	5	2	8
Matron, Disbursements	10	0	0
	£1890	8	4

To Fees for Maintenance of Patients £5 15 8

YEAR ENDING MARCH 31ST, 1904.

By Pinley Hospital:—	£	s.	d.
Fuel and Lighting ..	89	1	0
Rates, Taxes & Insurance	11	19	4
Provisions	207	1	11
Drugs, etc.	19	6	5
Ironmongery, etc. ..	26	1	0
Repairs, etc.	91	14	4
Tents	234	9	6
Drapery	18	7	3
Telephone	11	0	0
Stationery, etc. ..	4	13	9
Haulage and Carriage ..	9	16	4
Disinfectants	5	4	0
Boots	1	14	0
Plants	1	17	8
Expenses of Candidates (Caretaker)	3	6	8
Car Hire	0	14	0
Temporary Medical Attendance at Hospital	5	5	0
Wages of Staff	120	9	0
	£862	1	2

To Fees for Maintenance of Patients £46 16 9

The current quarterly expenses for the two hospitals in 1904 were as under:—

	City Hospital.			Pinley Hospital.		
	£	s.	d.	£	s.	d.
1st Quarter -	274	0	11	80	19	10
2nd Quarter -	367	5	11	156	9	3
3rd Quarter -	319	9	10	106	10	4
4th Quarter -	557	18	11	22	6	1
	1518	15	7	366	5	6

During the same time there were received on account of patients from outside districts £66 9s. for patients admitted to the City Hospital, and £271 16s. 11d. for patients admitted to the Pinley Hospital.

For the City Hospital this sum for maintenance expenses, divided among the average number of patients, amounts to £1 0s. 2½d. per head each week.

The average amount expended per week at this Hospital on diet amounted to £10 1s. 6d.; this divided among the average number of patients and boarded staff comes to 4s. 4d. per head per week. I am of the opinion that this figure speaks very well for the house-keeping management of the Hospital.

For the Pinley Hospital the maintenance expenses, divided among the average number of patients who were in the Hospital during the 17 weeks that it was open, amounts to £3 6s. 6d. per head. This sum includes all those maintenance expenses which were incurred during the rest of the year when the Hospital was closed.

The average weekly amount expended at this Hospital in diet was £4 16s.; this divided among the average number of patients and boarded staff amounts to 5s. 6d. per head per week.

Disinfecting Station.

The following figures represent the work that has been done in connection with the Disinfection and Ambulance Station:—

Visits paid to houses where infectious disease was suspected or notified—1,093.

Patients removed to the City Hospital—225.

Patients removed to the Pinley Hospital—5.

Patients removed for neighbouring authorities or from neighbouring districts—6.

Houses disinfected by fumigation or spraying—976.

Conveyances disinfected—0.

Steam disinfecting apparatus used 255 times.

Articles disinfected by steam—10,311.

Disinfection of rooms by fumigation or spraying, and of clothing, etc., by heat, has been carried out in all notified cases of infectious disease.

The disinfection that has been done in cases of Tuberculosis is referred to under that disease.

In certain cases, when a person suffering from an infectious disease has been nursed at home, or when for any other reason more complete disinfection has been thought necessary than either fumigation with sulphur fumes or spraying with formalin, the powers conferred by the Infectious Disease (Prevention) Act, 1890, Section 5, are made use of, and the owner or occupier is called on to strip the walls of paper, and to re-paper or to lime-wash. During the year 125 houses have been disinfected in this way.

The Need of a Public Mortuary.

Some steps were taken by your Watch Committee in the matter of erecting a Public Mortuary during the year, and on June 21st that Committee recommended to your Council a proposal for the erection of a mortuary in the rear of the police buildings, at a cost of £130. This proposal was approved by your Council.

I had not had the advantage of seeing the plan of this proposed mortuary, or of knowing that its recommendation was imminent. And on June 28th I presented the following report to your Sanitary Committee:—

" For some years past I have in my Annual Reports directed attention to the need of the provision of a Public Mortuary.

Your Committee is aware that at the last Council meeting a recommendation by the Watch Committee was put forward and adopted for the building of a mortuary in the rear of the police buildings.

Since then—through the courtesy of the City Engineer—I have seen the plan of the proposed mortuary; and as I believe that the proposed building will be found insufficient and inadequate, I take this opportunity of expressing this opinion rather than waiting until it is built.

As a convenient place for the reception of bodies found by the Police, the proposed building may be of use; but there are various sanitary advantages to be derived from the encouragement of the use of a mortuary which render the provision of such a building—with these advantages in view—my excuse for reporting on the matter to your Committee.

The proposed building consists of one small room, 21 feet long and 9 feet wide; the room is to be lighted from the top, and the internal fittings consist of one post-mortem table, one slab affixed to the wall, and a lavatory basin.

The purposes for which a fully-equipped mortuary may be of service are as follows :—

1. The reception of bodies unknown, or after accident, etc., usually brought in by the Police.
2. The viewing of a body by a coroner's jury.
3. The viewing of a body by relatives or supposed relatives for the purpose of identification, etc.
4. The reception of bodies of persons dying in overcrowded houses, where there is no separate room for the accommodation of the body.
5. The reception of bodies of persons dying from infectious disease in private houses.
6. The performance of post-mortem examinations at the direction of the coroner.
7. The performance of post-mortem examinations, not ordered by the coroner, but necessary for one reason or another where such performance is inconvenient or impossible in private houses.

That one small room can adequately and properly serve all these functions is clearly impossible in a large town such as this.

When a public mortuary is built, it will be competent for any Justice—on application of the Medical Officer of Health—to order the removal to it of any body of a person who has died of an infectious disease, or of any body of a person who has died of any other disease, which is situated in a room used as a dwelling place, sleeping place, or workroom.

The occasions when such removals are desirable are frequently occurring.

Further, it may be hoped—if a building is erected which is not repulsive in its appointments—that poorer people may gradually be induced to take advantage of the accommodation provided by a mortuary to lessen the inconvenience of providing for a dead body in an already overcrowded dwelling. Stranger things have happened; as an illustration I would cite the Infectious Hospital; at its inception the greatest difficulty was experienced in inducing people to use it; the repugnance to that institution has now entirely disappeared, and during the last eight years it has only once been necessary to obtain a Justice's order for the removal of a patient to the Hospital.

The figures of other towns may be misleading in regard to the utility of a mortuary in this town, but they afford information as to the extent of the use of mortuaries elsewhere. I have this week received the Annual Report of the Metropolitan Borough of Lambeth; that borough has just four times the population of Coventry; during 1903, 437 bodies were received into the two public mortuaries; of this number only 47 were bodies of persons killed by drowning, suicide, accident, etc.

The demand for the mortuary by cases removed by the police forms therefore a comparatively small proportion of the total number.

The proposed building only gives accommodation for two bodies, one being placed on the slab provided, and the other on the post-mortem table. The inadequacy of this provision seems clear. Also, a room used for post-mortem purposes is not a place to which the attendance of juries should be invited; that relatives of deceased persons should be admitted to the post-mortem room itself is still more objectionable; and this quite apart from the fact that during and for some time after the performance of a post-mortem such a room is highly repulsive to an ordinary individual.

The provision of a separate chamber for infectious cases is laid down as essential by the memorandum of the Local Government Board dealing with the provision of mortuaries.

There is also a legal question in regard to the provision of a mortuary in one and the same room as the post-mortem room, which requires consideration before this building is proceeded with, namely, that Section 143 of the Public Health Act, 1875, makes it legal for a local authority to provide accommodation for post-mortems *except at a Workhouse or at a mortuary.* The provision of adequate post-mortem accommodation is very necessary, and it should not be in the mortuary or place of reception for bodies.

The post-mortem room itself—to serve properly the purposes for which it is needed—requires to be built with a due regard to the requirements which will certainly be demanded of it when in use.

There are four mortuaries at present in or belonging to the City, namely, one at the Workhouse, one at the Coventry and Warwickshire Hospital, and one each at the City and Pinley Hospitals; I am informed that that at the Workhouse has sometimes had to accommodate 6 bodies; that at the Coventry and Warwickshire Hospital 4 bodies; that at the City Hospital is merely an out-house, but has on occasions received 2 bodies.

Most general hospitals are provided with a mortuary which would better fulfil the purposes of a public morutary than that proposed.

The difficulty in appropriating a portion of the site at the rear of the Police Buildings to a mortuary at the present time—until the plan for the Municipal Buildings is definitely agreed upon—is referred to in the report of the City Engineer, made to the Watch Committee on December 22nd, 1903; and in that report it is suggested that in the event of the public buildings being erected, it might be found necessary to sacrifice this building in the interests of the larger scheme.

This matter is worthy of every attention, for it has to be remembered that any public mortuary erected will certainly receive the bodies of persons who have died from infectious disease, and at times it will receive bodies drowned and in an advanced state of decomposition. The proximity of the proposed building to existing or future buildings should be well thought of before this site is finally adopted.

I am raising this question at the present time, so that if your Committee so wishes, your views concerning the desirability of further considering this matter, before it is too late, may be represented to the Watch Committee. It might even be thought desirable to see, or obtain particulars of, some recently erected mortuaries in some other towns before the present proposed building is actually proceeded with."

This report was referred to your Watch Committee for consideration, and that Committee resolved to proceed with the scheme which had been adopted.

In reply to an application to the Local Government Board in regard to the use of the proposed land for this purpose, that Board wrote on December 21st last that they were not empowered to give a direction which would authorize the use of the land for a purpose other than that for which it was acquired; and that, further, the land in their opinion was not a suitable site for a mortuary, owing to its confined situation and its proximity to other buildings.

The necessity for such an institution still remains.

Schools.

The notifications of supposed infectious disease among scholars which have been made to me during the year, under the compulsory notification system introduced by the Corporation Act of 1900, are set out in the accompanying table. Over 700 such notifications have been received. This is considerably less than in 1903, owing to the diminished prevalence of Measles. Most of these houses are visited by an assistant inspector; in certain diseases printed lists of precautions concerning the isolation of the patient are left. It often happens that the infectious disease alleged does not exist, and the visit of the inspector is of some importance from the point of view of school attendance. Where necessary, advice is given that a medical man should be called in.

During the year I have sent to the schools 262 notices requesting that certain children, either affected with infectious disease or living in houses where infectious disease existed, should be prevented from attending school; and also 103 notices intimating that certain children excluded might safely return to school.

It has not been necessary for your Sanitary Committee to order the closure of any school during the year on account of the prevalence of infectious disease.

In the case of one school it came to my knowledge that several of the scholars were suffering from Ophthalmia; I visited the school, and the Head Teacher courteously allowed me to examine several of the children regarding the condition of their eyes; I found several of them with a chronic form of Ophthalmia, and as this is a disease which is very liable to spread in schools, and then becomes very intractable, I advised that they should be excluded from school attendance, and I wrote to their parents advising that they should seek medical treatment for their children's eyes, and continue it until they were well.

In the case of certain of the schools at Foleshill it became necessary to advise that the pail-closets should be converted into water-closets, now that sewers are available; inasmuch as I have not been asked to report directly on such matters to the Education Committee, the course adopted was to report on the matter to the Sanitary Committee, and this Committee referred the report to the Education Committee, and I understand that that Committee has given the necessary instructions to have this very desirable improvement carried out.

At the present moment there is a strong movement throughout the country in the matter of giving a greater amount of attention to the hygiene of schools and scholars than has been the case at any previous time. This is certainly the result of the amalgamation of the Educational Authority in the Sanitary Authority brought about by the Education Act. This movement has recently shown signs of its existence in the Conference on School Hygiene, which has lately been held by the Royal Sanitary Institute at the University of London. Your Sanitary Committee delegated me to attend this Conference. A very abbreviated account of its proceedings is appended to this report. It will be clear from that report that it may be confidently expected that much good may be accomplished, so far as future generations are concerned, by the hygienic training of scholars in a hygienic atmosphere; in order to effect this we must have hygienic schools; we must have teachers whose knowledge of hygiene is sufficiently practical for them to insist on the schoolrooms being adequately supplied with fresh air. It is one thing to provide means of adequate ventilation, and quite another to get these means employed. If children are practically taught the advantages of cleanliness and fresh air at school, they will appreciate them afterwards. The possibilities in the way of the sanitary well-being of the future generations, which are possessed by your Education Committee, are probably much greater than those possessed by the most energetic Sanitary Committee that might be chosen.

No.	School.	Measles.	Chicken Pox.	Whooping Cough.	Diphtheria.	Fever.
1	Red Lane	12	70	7	1	..
2	Paradise	23	4	..	3	7
3	Edgewick	22	4	30	2	3
4	Wheatley Street	18	18	26	2	7
5	Holy Trinity	16	16	27	..	14
6	Spon Street	19	11	2	..	4
7	St. Michael's..	18	17	40	5	..
8	Little Heath	15	4	4	4	9
9	All Saints'	12	7	14	1	..
10	St. Peter's	17	2	5	..	..
11	St. Thomas'	5	4	27	1	2
12	Union Street..	6	5	10	..	..
13	Radford	1	2	16	..	..
14	St. Mary's	5	3	..	..	2
15	Thomas Street	1	..	15	..	..
16	Stoke	3	2	..	..	1
17	Stoke National	8	..	..	..	..
18	South Street	3	..	2	..	..
19	St. Osburg's	2	4	1	..	2
20	St. Mark's	2	1	1	1	1
21	West Orchard	2	1	..	..	..
22	St. John's	2	..	..	..	1
23	British	1	1	1	1	..
24	Earlsdon	..	2	..	..	..
25	Kingfields	1	..	..	..	2
26	Miss Hales'	..	4	..	..	..
27	Miss Reece's	..	4	..	..	..
28	Miss Flinn's	..	..	2	..	..
		214	196	230	21	55
29	Public Vaccinator	3	4	..	..	..
30	Notifications from Parents..	..	1	..	..	..
		217	201	230	21	55

The Midwives Act, 1902.

This Act came into operation to some extent on April 1st, 1903. By it your Council is constituted the supervising authority over all midwives practising in the City. Your Council delegated the duties which are imposed by the Act to your Sanitary Committee; and that Committee has appointed your Medical Officer of Health the Executive Officer under the Act.

Only one case of non-compliance with the Rules of the Central Midwives Board was reported to your Sanitary Committee during the year; in this case the death of a child had been brought about by this non-compliance; your Sanitary Committee instructed me to report the facts to the Central Midwives Board, and this was done.

The Act does not come fully into operation until April 1st of the current year. Until that date those midwives who have no recognized qualification to practise, but have been acting as midwives during the requisite time, are enabled to apply for registration under the Act. After that date all who are registered will be required to produce evidence of having received the necessary training.

Concerning the operation of the Act locally in 1904, I presented the following report to your Sanitary Committee on January 10th of this year:—

"Your Committee, as the local Supervising Authority over Midwives under this Act, is required during the month of January in each year to supply the Secretary of the Central Midwives Board with the names and addresses of all midwives, who, during the preceding year, have notified their intention to practise within the City, and to keep a current copy of the roll of midwives accessible at all reasonable times for public inspection.

The current copy of the roll of midwives I have already obtained, and it will be accessible for inspection at all reasonable times.

The midwives who have notified their intention to practise within the City in 1904 are the following:—

Mrs. Charlton, 4, Union Street.
Mrs. Evetts, 41, Whitefriars' Street.
Mrs. Green, 17, Lower Wellington Street.
Mrs. Morton, 96, Cox Street.
Mrs. Timms, 7, Castle Street.

A number of women practising as midwives have so far neglected to register themselves, or to give notice of their intention to practise. It is therefore probable that the list will be increased during the current quarter. After the current quarter no woman will be able to register without passing a qualifying examination.

If your Committee so order, I propose sending the above list to the Secretary of the Central Midwives Board, in accordance with the requirements of the Act.

Another obligation of your Committee under this Act is to exercise a general supervision over midwives, and to see that they conform to the rules framed under the Act.

As the Executive Officer under the Act I have called on those mentioned, and examined as to whether they have provided themselves with the appliances required by the rules, and whether they keep the records of their cases in the required form.

In only one of the five cases were the rules complied with; and in no cases have midwives notified me of still-births, or of their having called in medical men as required by the Act.

I have informed each one that by my next visit the rules must be complied with, or otherwise the matter would have to be reported.

There are one or more of the midwives practising in the City who can neither read nor write. It is not easy to see how it will be possible for them to carry out rules which they cannot read, or fill up registers with full particulars of their cases when they cannot write. I understand that the Central Midwives Board has been asked how the rules are to be enforced in these circumstances, and that no satisfactory answer has so far been given."

In order that medical men practising in the City should be made cognisant of the principles and rules of the Act, your Sanitary Committee instructed me to forward to each one an abstract of the Act and of the Rules. These were accompanied with the following letter:—

25th February, 1904.

DEAR SIR,

I am instructed by the Sanitary Committee to forward to each medical man practising in Coventry, for his information, an Abstract of the Midwives Act and an Abstract of the Rules laid down for the guidance of Midwives by the Central Midwives Board.

I am herewith enclosing copies of these. If at any time you meet with any circumstances in connection with the non-observance of these Rules on the part of Midwives which you think should be dealt with, I shall be glad to give the matter attention on hearing from you.

Yours faithfully,
E. H. Snell,
Executive Officer under the Midwives Act.

Pauperism.

Mr. Arch, the Clerk to the Guardians, has kindly supplied me with the following figures relating to this subject :—

Number of inmates of Workhouse at end of year 1904...	491
Average number of inmates for previous five years ...	438
Number of persons who received out-door relief in 1902	870
Average number of persons who received out-door relief in previous five years	727

	£	s.	d.
Actual expenditure in out-door relief in 1904	2,857	13	4¼
Average yearly expenditure in out-door relief in previous five years	2,591	4	6½
Increase on the average expenditure in out-door relief	266	8	9¾

Housing of the Working Classes Act, 1890.

The following table summarizes the action which has been taken under Part II. of this Act, and the results which have followed :—

YEAR.	Condemned on Certificate of M.O.H.	Improved in consequence.	Closed.	Re-opened after Improvement.	Back-to-back Houses made through-ventilated by the inclusion of 2 Houses in 1.
1891	62	9	6	...	18
1892	43	10	29	...	...
1893	36	8	33	...	10
1894	6	5	1	...	4
1895	15	5	1	...	6
1896	9	...	4	...	...
1897	2	...	2	...	...
1898	4	2	...	...	...
1899	31	12	12	...	6
1900	75	30	5	...	6
1901	42	39	15	5	0
1902	43	23	12	8	0
1903	34	21	7	1	4
1904	40	39	7	1	4
Total ...	442	203	134	15	58

Of the seven houses closed, two were closed as dwelling-houses voluntarily, and five were closed by order of the Magistrates; one of these latter was subsequently improved, and an application for the rescinding of the closing order made.

The following is a statement of what has been done during the year :—

Houses improved:—

No. 2, The Hollow, Foleshill Road.
No. 4, ,, ,, ,,
No. 7, ,, ,, ,,
No. 25, Bishopgate Green.
No. 16, Henry Street.
No. 24, Bishopgate Green.
No. 26, ,, ,,
No. 1 in Court 16, Far Gosford Street.
No. 2 in Court 7, Grey Friars' Lane.
No. 3 ,, ,, ,,
No. 4 ,, ,, ,,
Also 16 houses in Narrow Lane, where the defects were dealt with as "nuisances," the work carried out by the Corporation, and the costs recovered from the owner.

Back to Back houses made through-ventilated by the inclusion of two houses in one:—

Nos. 1 and 2 in Court 5, Grey Friars' Lane.
No. 33 in Court 13, Saint John Street, and house in rear.

Houses condemned in 1903, *and improved in* 1904:—

Nos. 9, 10, 11, 12, and 13, Freeth Street.
No. 4 in Court 1, Hill Cross.
Nos. 5, 6, and 7 in Court 4, Well Street.
Nos. 44 and 45, West Orchard (used as one house).

House condemned in 1902, *and improved in* 1904:—

No. 12, Harnall Row.

House improved after closure by Magistrates' Order, and re-opened:—

26, Gosford Street.

Houses closed by Magistrates' Order:—

Nos. 5 and 6 in Court 20, Much Park Street.
Nos. 1 and 2 in Court 3, Swan Street.

(In the last two cases the procedure of the Housing of the Working Classes Act of 1903 was adopted, and no notice served on the owner before application was made for the closing order.)

Houses voluntarily closed as dwelling-houses after they had been condemned:—

17, Butcher Row.
Nos. 1 and 2, Priory Row (one house).

Houses as yet unimproved, or improved unsatisfactorily:—

Nos. 5, 6, 7, 8, and 9 in Court 7, Grey Friars' Lane.
No. 9 in Court 5, Spon Street.
Nos. 7 and 9 in Court 37, Spon Street.
No. 5 in Court 1, Thomas Street.

The work that has been accomplished under this head cannot be described as large; the tedious nature of the proceedings under the Act form a considerable hindrance to dealing in an effective way with the many undesirable houses that still remain in this City.

A large amount remains to be done in the way of altering the many not-through-ventilated houses. One difficulty exists in many of these in the fact that the conversion of back-to-back houses into single through-ventilated houses causes a diminution in the supply of small houses with one or two rooms, and the property resulting consists of large many-roomed houses, larger than is required, or can be reasonably paid for by the class of tenant who will consent to live in courts. In spite of this consideration, however, the objection to such houses that they are insanitary, that the death rate in them is greater than in through-ventilated houses, and that they should not be allowed to continue, remains.

Overcrowding.

Twenty-three cases of Overcrowding were dealt with during the year. Most of these were remedied by a verbal warning or a preliminary notice. In six instances they were reported to your Sanitary Committee, and statutory notices served on the tenant. The particulars of these were as follows :—

(1) The house contained two bedrooms, with a united capacity of 1,414 cubic feet; the family living in the house consisted of the father, mother, three daughters, aged 17, 16 and 13; a son, aged 8, and two younger daughters, aged 5 years and 7 weeks respectively; that is, there were 6 people above 12 years of age and 3 children, or there was a cubic space of 157 feet for each nominal adult.

(2) The house was a two-roomed house; the one bedroom had a cubic capacity of 811 feet, and the occupants were a widow and 6 children, whose ages ranged from 16 to 3. The three eldest girls were the only ones who could work, and their earnings were said to average 5s. per week each; the rent of the house was 2s. 9d. per week.

(3) The house consisted of one living room and one bedroom, and was occupied by a man, his wife, and 3 children, of ages varying from 16 to 3 years. The bedroom contained 1,094 cubic feet. The tenant was a bricklayer by trade.

(4) The house contained two bedrooms, with a united capacity of 1,337 cubic feet; the tenants consisted of a father, mother, and 5 daughters, aged respectively 20, 16, 10, 7, and 8. The father's earnings averaged 25s. weekly, and the two eldest daughters probably earned 20s. weekly between them.

(5) The house contained three rooms occupied as bedrooms, besides two living rooms, and one top shop not so occupied. The cubic contents of the three bedrooms amounted to 2,399 feet; the occupants included 3 adult women, 4 men, and 4 children of ages varying from 1 to 14 years.

(6) This house contained one living room and one bedroom, the cubic contents of the latter being about 1,170 feet; the house was occupied by a man, his wife, and 4 children, of ages varying from 18 months to 15 years. In this case the man was a labourer, and his wife a rag-sorter.

The number of cases of overcrowding which become known to the Health Department probably represent only a small part of those which actually occur. My experience has been that some of these cases are due to absolute poverty brought about by illness, or other circumstance such as the death of the wage-earner; it may sometimes be due to lack of work or inadaptability to work which is available; it is sometimes due to the fact that a small proportion of the earnings are apportioned to household expenses, which generally means that too much is spent in drink.

House Accommodation.

It is my custom in each November to make an enumeration of the unoccupied houses in the City.

This return is useful in correcting the estimate of the population obtained in other ways; and it is also a valuable index of the extent to which private enterprise is meeting the demand for houses.

The return for 1904 is given below.

It shows that among the houses rented at £20 and upwards there is a very slight increase in void houses over last year's figures; among houses rented at from 5s. 6d. to 7s. 6d. the number of empty houses has more than doubled; and the same is true of the houses rented at from 2s. 6d. to 5s.

Totalling these figures, there were 261 more empty houses than at the corresponding time in 1903.

	1904.	1903.
£20 and upwards ...	85	76
5/6 to 7/6 per week ...	254	120
2/6 to 5/- per week ...	207	88
Under 2/6 per week ...	1	2
Totals ...	547	286

The distribution of these empty houses in the several wards is shown below :—

WARD.	£20 and upwards.	5/6 to 7/6 per week.	2/6 to 5/- per week.	Under 2/6.	Total.
Foleshill Ward	4	60	17	...	81
Swanswell Ward	1	64	11	...	76
Harnall Ward	4	18	16	...	38
Radford Ward	5	29	9	...	43
Bablake Ward	11	3	26	...	40
Cheylesm're Ward	18	5	37	1	61
Hearsall Ward	15	17	13	...	45
Grey Friars' Ward	12	2	15	...	29
Hill Fields Ward	8	27	5	...	40
All Saints' Ward	...	7	16	...	23
St. Mary's Ward	2	5	24	...	31
Stoke Ward	5	17	18	...	40
Totals ...	85	254	207	1	547

Your City Engineer has kindly furnished me with the following interesting figures concerning the building operations for the past 13 years. The numbers are made up to November 30th in each year. It will be noted that while 1903 was a record year in the matter of the completion of dwelling houses up to that date, this figure was still further exceeded in 1904.

The following table shows the building operations of the last thirteen years :—

Year.	Houses.	Factories and Workshops	Alterations and Additions.	Miscellan's	Public Buildings.	Churches.	Chapels.	Schools.	Streets.	Totals.
PLANS APPROVED.										
1892	152	13	75	8	0	0	0	0	6	254
1893	227	22	82	13	0	1	0	0	0	345
1894	180	15	73	14	0	0	1	1	1	285
1895	145	9	65	7	0	0	0	0	1	227
1896	548	67	125	1	0	0	1	0	21	753
1897	697	24	157	3	3	0	0	1	11	896
1898	425	17	167	7	6	1	1	0	19	643
1899	528	26	163	89	0	0	0	2	5	813
1900	488	11	106	24	1	1	1	1	3	636
1901	304	10	60	36	0	1	1	0	2	414
1902	556	29	53	66	0	0	0	0	10	714
1903	810	16	95	68	1	0	0	1	4	995
1904	535	26	80	56	3	0	0	0	16	716
BUILDINGS COMPLETED.										
1892	117	18	58	5	0	0	0	0	2	200
1893	193	13	65	9	0	1	0	0	3	284
1894	200	18	60	12	0	0	0	0	0	299
1895	129	10	53	12	0	0	1	1	2	208
1896	171	49	89	3	0	0	0	0	3	315
1897	399	48	56	2	2	0	0	1	0	508
1898	501	19	115	5	1	0	1	0	13	655
1899	466	13	101	21	0	0	1	1	9	612
1900	488	19	95	26	1	1	0	2	11	643
1901	426	8	27	18	0	1	1	1	0	482
1902	403	18	19	21	0	0	0	0	6	467
1903	622	15	34	8	2	0	0	0	6	687
1904	671	13	39	21	0	0	0	2 (Addit'ns)	0	746

Registered Places.

The questions that have arisen in connection with these, and the action which has been taken, are dealt with below :—

SLAUGHTER HOUSES.

During the year five applications have been made to your Sanitary Committee for licences for the erection and use of private slaughter houses, and with one exception they were refused. The use of two licensed slaughter-houses has been discontinued, and two new ones have been erected, the plans for one of these having been approved in 1902.

There are now 53 private slaughter-houses in use; 1,355 visits to these premises have been made.

Thirty-five voluntary notifications have been received from butchers when animals were found to be unsound during the process of slaughter; as a result of these notifications, 1,746 lbs. of beef and 365 lbs. of pork have been destroyed after voluntary surrender.

One prosecution has been instituted for exposing unsound meat for sale, the defendant being fined £5 and costs.

Action was taken regarding slaughtering in a shed (which was unlicensed) on three different occasions. In the first and third instance the occupier was fined £2 and costs and £3 and costs respectively; in the second instance the slaughterman was fined £2 10s. and costs.

As there are fifty-three private slaughter-houses in this City, it is unnecesasry for me to add that no effective supervision or inspection of the meat supply is possible.

As for the slaughter-houses themselves, these are mostly old places or sheds which are totally unfit for the purpose for which they are employed; and they are for the most part situated in positions quite unsuited for slaughter-houses; many of them are in common courts, and are open to the gaze of the inhabitants. These and many of the other undesirable features of these structures I have frequently reported to your Council.

Such defects as improper floors, bad drainage, etc., can be and are from time to time remedied. The serious evil resulting from the continued use of such places cannot be got rid of except by the closure of the majority of the existing slaughter-houses. This can only be done by the erection of a public abattoir. This matter your Council had before you in January last, and it was decided to adjourn its consideration.

As most of the existing slaughter-houses are hidden away in courts and back premises, they are probably unknown to the average citizen. I am therefore reproducing in this report one internal and two external views of these places where the animal food of the public is prepared.

During the year was issued the Report of the Committee appointed by the Admiralty to consider the Humane Slaughtering of Animals. As some of their general recommendations are very much to the point in this connection, I am reproducing a few of them here :—

" (*a*) All animals, without exception, should be stunned, or otherwise rendered unconscious, before blood is drawn.

(*b*) In the interests not only of humanity, but of sanitation, order, and ultimate economy, it is highly desirable that, where circumstances permit, private slaughter-houses should be replaced by public abattoirs, and that no killing should be permitted except in the latter, under official supervision. Such a change as this could only be brought about gradually and by legislation, but it cannot be described as impracticable, in view of the fact that this system is prescribed by law in several Continental countries, and is actually enforced in the city of Edinburgh.

(*c*) There should be an efficient system of inspection and supervision of all slaughter-houses, whether public or private, by the local authority, and uniformity in methods of slaughter should be introduced and enforced as far as possible.

(*d*) All slaughtermen, and others employed in or about slaughter-houses, should be licensed by the local authority. The Committee have carefuly considered the question as to whether the licence should partake of the nature of a certificate of proficiency, but they recommend that, for the present at any rate, it should be merely permissive (like the present licence for motor drivers), having as its main value the power of withdrawal in case of cruelty, incompetence, or misconduct. Only a nominal fee should be charged for a licence. The Committee have received a good deal of evidence to show that the institution of licences would not only be desirable from a general standpoint, but would also be received with favour by the trade."

The following is an extract from the Annual Health Report for this City twenty years ago, viz., in 1884:—

"The 55 slaughter-houses existing in your district were also regularly inspected, and have been considerably improved. Proceedings before the Magistrates were necessary in four instances to enforce the regulations. Many of the slaughter-houses are situated in such crowded neighbourhoods that the slaughtering cannot be carried on without creating a nuisance, while the dangers of driving animals to them are serious, and these objections will remain until a public abattoir is constructed."

DAIRIES, COWSHEDS AND MILKSHOPS.

COWSHEDS.

There are 28 cowsheds within the City. In 1891 there were 60. The figures available prior to that date are unreliable, since the Register was not accurately kept. From 1891 until the present time the number has been gradually diminishing. Two causes for this can be suggested; in some instances the land occupied by the sheds has been required for building purposes, and their removal elsewhere has been compulsory; the second cause is sufficiently clearly contained in the following quotation from "The Bacteriology of Milk," by Swithinbank and Newman. "In a general way it may be said that country cowsheds and country cows are maintained at a lower standard of sanitation than town cows or cowsheds. The Dairy Order is administered in many rural districts with considerable laxity, and the personal interests of the members of the Local Authority lead to a certain degree of supineness. It is the exception rather than the rule for regulations under the Order to be adopted, or, if adopted, to be enforced. In towns, on the other hand, regulations are usually enforced with more or less strictness." And again, "many local authorities are suffering from supineness, or lack of interest in the trade, or perhaps too much interest in the trade, and nothing is done, though the statute book contains all that is immediately requisite."

Be that as it may, it is certain that your Local Authority has no immediate control over the majority of the cowsheds from which milk is supplied to your City.

Much has recently been said as to the necessity of securing a pure milk supply; much more remains to be said and done in the immediate future. There is no doubt whatever that if we could only obtain a pure milk supply, our present heavy infantile mortality could be considerably lessened. In order to secure this we not only want to obtain cleanliness in methods of transit, and storage in shops and in the home, but must in the first place secure cleanliness in the cowshed, in the building itself, in the cows, and in the milkers. It is curious how the cleanliness of the average modern dairy compares with the filth which pertains in everything associated with the stages through which the milk goes before it reaches the dairy. Unless we get clean cowsheds we cannot have clean cows. Of 1,441 cows inspected for the Manchester Corporation in 1901, as many as 379 were described as "very dirty." The Veterinary Inspector writes: "Nearly always bad cowsheds and dirty cows were found together, though occasionally this does not hold good; but, as a general rule, where you find bad insanitary cowsheds, you find dirty cows. When I speak of dirty cows, I mean not only those with dirty quarters and tails, but those in which the udders are also dirty. . . . So plastered up with dung and dirt do we find some udders, that the dirt effectually masks any slight abnormality, such as commencing induration." *

An effort has been made during the year to enforce some of the elementary principles of cleanliness by insisting on periodical limewashing, and on the regular cleansing of floors. One hundred and fifteen visits have been paid to cowsheds, and as in 13 instances these principles were ignored, I brought the matter to the attention of your Sanitary Committee, and on their instructions I forwarded the accompanying letter to the occupiers of these cowsheds:—

6th October, 1904.

DEAR SIR,

I am instructed by the Sanitary Committee to write to all the occupiers of cowsheds in the City, again drawing their attention to the Regulations affecting Cowsheds. They desire me to draw particular attention to Regulation No. 5, which requires the limewashing of the *whole of the interior* (except where it is painted, varnished, etc.) once during May, and once during October in each year, and at such other times as may be necessary; section 3 of the same Regulation requires the floor of each cowshed to be thoroughly swept, and all dung and other offensive matter removed daily.

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* Report on the Health of the City of Manchester, 1901.

I am instructed to add that in future, in the event of this and the other Regulations being disregarded, proceedings will be taken against the occupier of the cowshed.

Yours truly,
(Signed) E. H. SNELL,
Medical Officer of Health.

Magisterial proceedings were instituted against one cowkeeper for three offences, viz. : commencing to occupy a cowshed without first giving notice of his intention so to do, for neglecting to periodically limewash his cowshed, and for omitting to cleanse the floors in accordance with the requirements of the regulations; he was fined £2 and costs.

Two cowsheds have been enlarged so as to allow more efficient air space, light and ventilation; the drainage from two other sheds has been improved.

In one instance a cowkeeper was advised to discontinue mixing the milk from an unthrifty milch cow with the milk from other cows, and to remove the cow from the shed; this was done, and the animal was subsequently slaughtered and found to be tubercular and dropsical.

In one instance, at the request of the Health Department, a farm yard, on which cowsheds abutted, and which was used as a large manure pit, has been properly levelled up, and paved with granite setts.

MILKSHOPS.

The number of persons registered for the sale of milk continues to increase, 71 applications having been received for registration, and 40 names cancelled during the past year.

This increase to some extent is due to the requirements of the newly-developed districts, but in a greater measure owing to the facilities afforded for Registration—by the Milkshops Order, 1885—being taken advantage of by shopkeepers in a small way of business, who seek to add to a precarious livelihood by selling a few pints of milk per day—no matter how undesirable the premises may be in which the milk is to be stored—and who do not realize the responsibilities attached to the sale of milk until proceeded against for non-compliance with the Regulations or Adulteration Acts.

The total number on the Register is now 223. The whole of these milkshops have been visited twice during the year, and at other times as occasion required to enforce compliance with the regulations with regard to the storage of milk. The total number of visits paid to milkshops was 591.

In one instance legal proceedings were instituted against a milkseller for failing to apply for registration, the summons being withdrawn on payment of costs. Three similar contraventions were subsequently reported to the Sanitary Committee, who resolved to publish the Milkshops Order for the guidance of persons contemplating the sale of milk.

Several milksellers have been verbally cautioned with regard to the improper storage of milk, and 19 notices have been issued concerning this matter.

COMMON LODGING HOUSES.

There are five Common Lodging Houses. These have been visited on 135 occasions during the year. There is some improvement in the way in which the Byelaws regulating them are observed. The only contravention reported during the year was that of a keeper who did not constantly reside on the premises, as required by the Corporation Act, 1900. After consideration of the circumstances, your Sanitary Committee decided that this provision of the Act must be complied with, and ordered that circular letters to this effect should be sent to the occupiers of all these houses.

One application for registration as a Common Lodging House has been received; the application was, however, refused, as the house was not considered to be suitable for the purpose.

In consequence of the continuance of Small Pox throughout the country, your Sanitary Committee put into force Section 83 of the Public Health Act, 1875, requiring the occupiers of Common Lodging Houses to make a daily return of all the lodgers whom they received. Visits have been made both by day and by night to verify the accuracy of the returns made.

Only one case of Small Pox arose in a Common Lodging House; this case is referred to under the heading of Small Pox: before removal he had visited three houses in the City seeking medical relief and advice.

HOUSES LET IN LODGINGS.

There are now 10 houses on the register as houses let in lodgings. Only the worst class of houses let in lodgings are placed on the Register, and so brought under the Byelaws regulating these houses.

One of these had been persistently used as a Common Lodging House, in spite of repeated warnings and even prosecutions. Midnight visits were paid to this house during the year, and as it was still being used as a Common Lodging House proceedings were taken against the occupier; these were adjourned for 28 days to enable the defendant to vacate the premises—a course preferable to inflicting a fine—and this being accomplished, the proceedings were withdrawn.

The 10 houses on the Register contain 56 rooms, let separately as dwellings.

Offensive Trades.

No question has arisen during the year in connection with those trades which come under the legal designation of "offensive," and no applications for the starting of any new trades of this character have been received.

Smoke Abatement.

Owing to excessive emission of black smoke from factory and furnace chimneys it has been found necessary to make 195 special observations on 39 chimneys, or nearly one-half of the total number of works chimneys in the district.

Twenty-six stokers were interviewed and verbally cautioned, and twenty-one letters and notices were issued to various owners on this subject.

Complaints were received during the year as to the nuisance arising from offensive smoke emitted from the locomotive engines during shunting operations on the railway sidings near Spencer Park. Observations were made, and the matter was brought to the notice of the railway companies by your Sanitary Committee; subsequent observations showed that the nuisance had been to some extent abated.

Factory and Workshop Act, 1901.

Section 132 of this Act is as follows :—

"The Medical Officer of Health of every District Council shall in his annual report to them, report specifically on the administration of this Act in workshops and work places, and he shall send a copy of his annual report or so much of it as deals with this subject to the Secretary of State."

FACTORIES.

The inspection of factories comes within the province of H.M. Inspector of Factories. Where any sanitary defect is discovered by him in a factory which is remediable under the law relating to public health, and not under the Factory and Workshop Act, it is his duty to inform the Council of this, and the duty of the Council to see that the defect is remedied. One notification of such a defect has been received from the Inspector of Factories during the year. This concerned the alleged absence of the provision of separate w.c. accommodation for the two sexes; on enquiry it was found that this was provided for in the case referred to.

WORKSHOPS.

The amount and nature of the supervision which has been exercised during the year over workshops can probably be most briefly and clearly explained in the following table, the form of which has been suggested as appropriate for this purpose by the Home Office :—

Factories, Workshops, Laundries, Workplaces, and Homework.

1.—INSPECTION.

Including inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
FACTORIES .. .. (Including Factory Laundries.)	20	..	..
WORKSHOPS .. .. (Including Workshop Laundries.) WORKPLACES	943	30	..
HOMEWORKERS' PREMISES	?	..	..
TOTAL	963	30	..

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
*Nuisances under the Public Health Acts:—**				
Want of cleanliness	24	24	..	..
Want of ventilation	..	..	..	..
Overcrowding	..	..	..	..
Want of drainage of floors	..	..	..	..
Other nuisances	1	1	..	..
†Sanitary accommodations insufficient	..	..	..	..
unsuitable or defective..	..	..	..	..
not separate for sexes ..	3	3	..	..
Offences under the Factory and Workshop Act:—				
Illegal occupation of underground bakehouse (S. 101)..	2	2	..	..
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)	3	3	..	..
Failure as regard lists of outworkers (S. 107)	1	1	..	..
Giving out work to be done in premises which are unwholesome (S. 108)..	..	..	..	..
infected (S. 110) ..	..	..	..	..
Allowing wearing apparel to be made in premises infected by scarlet fever or smallpox (S. 109)	..	..	..	..
Other offences	..	..	..	..
Total	34	34	..	..

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* Including those specified in Sections 2, 3, 7 and 8, of the Factory Act as remediable under the Public Health Acts.

† For districts not in London state here whether Section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council; and if so what standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

Factories, Workshops, Laundries, Workplaces, and Homework—continued.

3.—OTHER MATTERS.

Class.		Number.	
Matters notified to H.M. Inspectors of Factories :—			
Failure to affix Abstract of the Factory and Workshop Act (S. 133)		7	
Action taken in matters referred by H M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (S. 5)	Notified by H.M. Inspector	2	
	Reports (of action taken) sent to H.M. Inspectors ..	..	
Other		4	
Underground Bakehouses (S. 101) :—			
In use during 1903		2	
Certificates granted	in 1903	..	
	in 1904	..	
In use at the end of 1904		0	
Homework :—		Number of	
*Lists of Outworkers** (S. 107) :—		Lists.	Outworkers.
Lists received		13	85
Addresses of outworkers	forwarded to other Authorities ..	..	3
	received from other Authorities ..	..	0
Homework in unwholesome or infected premises :—		Wearing Apparel.	Other.
Notices prohibiting homework in unwholesome premises (S. 108)		..	..
Cases of infectious disease notified in homeworkers' premises		..	..
Orders prohibiting homework in infected premises (S. 110) ..		..	..
Workshops on the Register (S. 131) at the end of 1904.			
Important classes of workshops, such as workshop bakehouses, may be enumerated here.			
Total number of workshops on Register		656	

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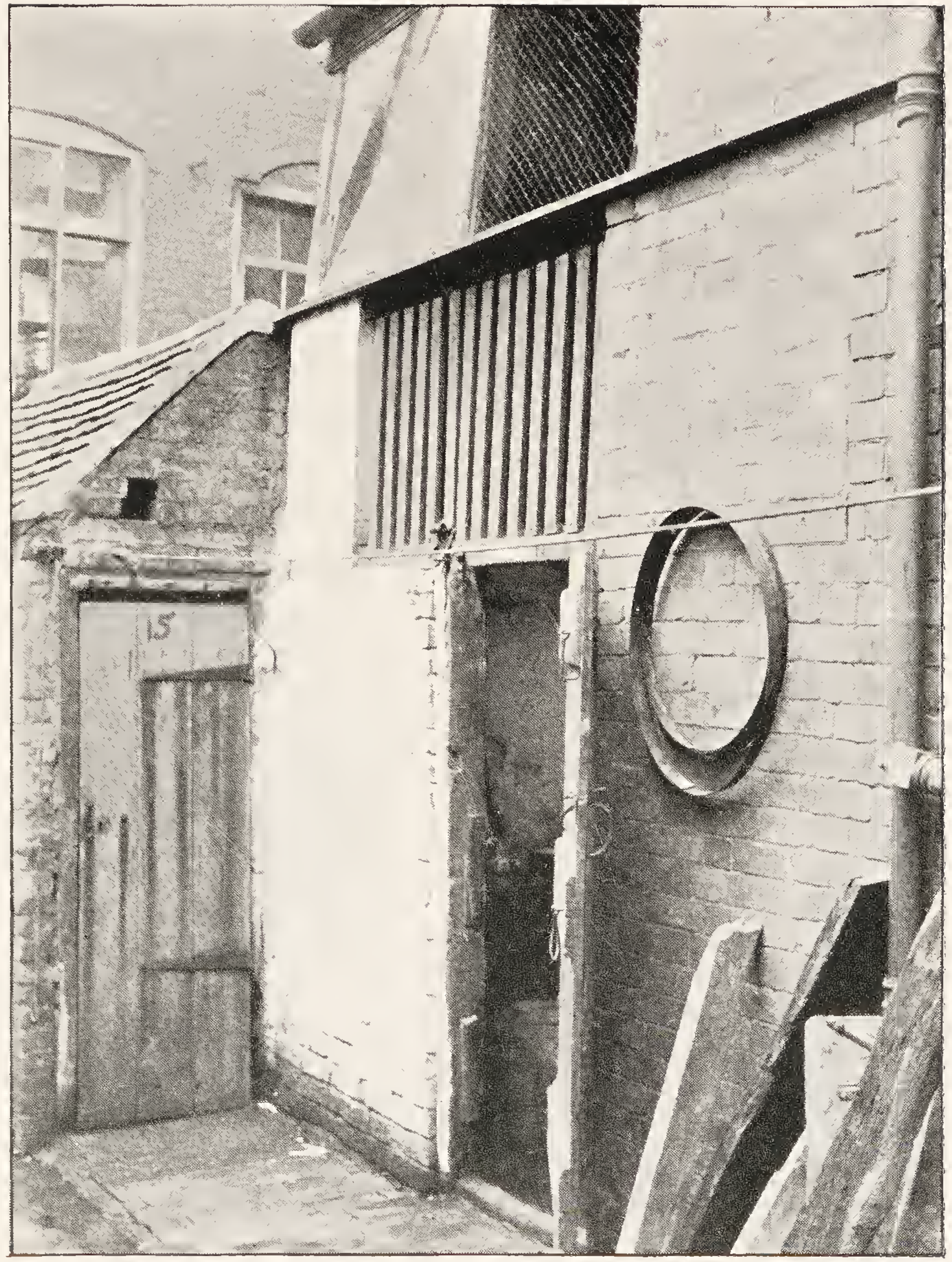
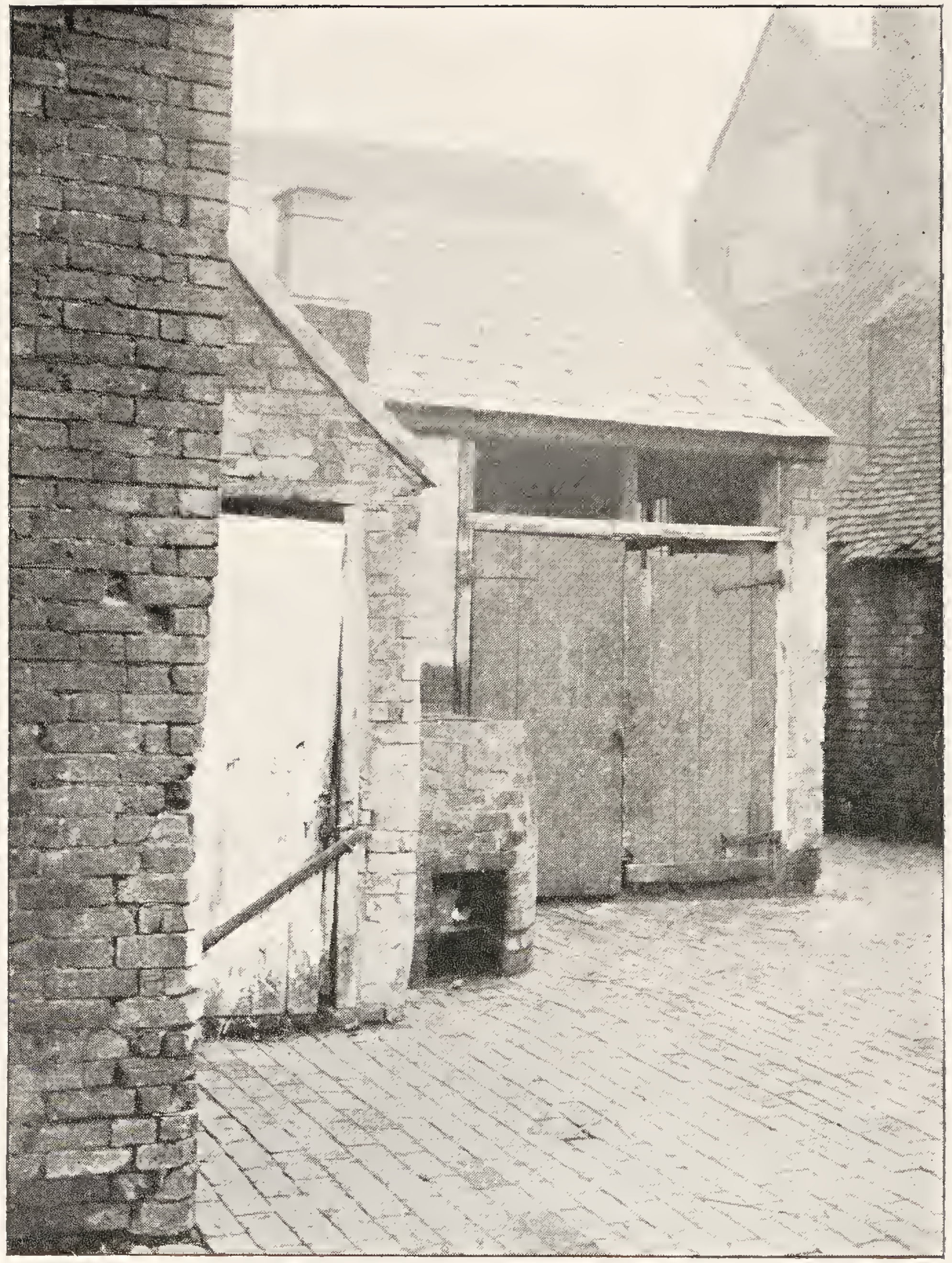
*The Lists should be received twice in the year. The year's figures required in the Table are then obtained by adding together the two half-yearly totals.

One reference was received from the Factory Inspector concerning the limewashing of a workshop; this matter was remedied.



Exterior of Private Slaughter House. The open door on the right is the door of the Slaughter House, the closed door on the left is the door of a water closet.



Exterior of Private Slaughter House. Situated in a Court. The double doors on right are the doors of the Slaughter House, the door on left is the door of the fasting pen.

The following is an analysis of the Workshops on the Register on December 31st, 1904:—

Bakehouses	111
Confectioners	5
Dressmakers	89
Tailors	54
Milliners	23
Ribbon Manufacturers	6
Shroud Manufacturers	1
Pattern Makers and Brass Founders	5
Ironmongers and Smiths	14
Plumbers and Painters	9
Gas Fitters and Bell Hangers	4
Cycle Repair Shops	12
Gear Case and Dress Guard Manufacturers	2
Cabinet Makers	5
Joiners and Carpenters	26
Coach Builders	4
Tyre Manufacturers	1
Watch Manufacturers	194
Boot Makers	44
Box and Bag Manufacturers	5
Printers and Bookbinders	5
Laundries	9
Basket Manufacturers	3
Card Stamping	3
Engravers	1
Marine Store Dealers	1
Rope Makers	2
Cleaners and Dyers	2
Pill Makers	1
Potters	1
Picture Dealers	1
Cane Workers	1
Saddlers	4
Concreters	1
Motor Accessories	1
Cork Manufacturers	1
Blind Manufacturers	1
Tinworkers	2
Botanic Brewer	1
	658

HOMEWORK.

The Act prescribes that the occupier of every factory or workshop engaged in certain specified kinds of work shall keep in a prescribed form and manner lists of the names and addresses of all persons directly employed by him outside the factory and workshop, and the places where they are employed; and also that he shall send, on or before the first day of February and the first day of August in each year copies of those lists to the District Council.

Considerable efforts have been made to have this requirement carried out; everything in fact short of taking legal proceedings against those who fail to carry it out. Considerable laxity, however, prevails as to the way in which the provision is carried out. In 1903, 27 lists were received giving names and addresses of 160 outworkers; last year only 13 lists were received concerning 85 outworkers.

In one instance the failure to make the return was drawn attention to by a case of Scarlet Fever occurring in a house where articles of clothing were made.

BAKEHOUSES.

There were 104 bakehouses in use at the end of the year. The following figures represent the number of visits which these have received, and the character of the defects which have received attention:—

Number of visits to bakehouses	342
Number of notices issued to limewash ...	3
Number of notices issued as to floors	3
Number of notices issued as to roofs and ceilings	3
Number of defects remedied after verbal request	67

The annual report for 1903 set forth at length the consideration which the question of underground bakehouses had received on account of the provisions of the Factory and Workshop Act, 1901, which enacted that after the 1st of January, 1904, no underground bakehouse should continue to be used unless the local authority certified that it was fit for use from a sanitary point of view; there were only two such bakehouses in your City; and each of these was in such a condition that it would have been impossible for any sanitary authority to certify that either was fit for use; when this position was thoroughly understood by the occupiers of these two bakehouses, and after several warnings from your Sanitary Committee that their continued occupation and use for this purpose must cease, their occupation was discontinued, and both occupiers obtained accommodation elsewhere.

Sanitary Prosecutions.

The occasions on which it was necessary to resort to Magisterial proceedings during the year were satisfactorily infrequent. On only 28 occasions was this course adopted. Particulars of these instances are given in the table at the end of this report.

Tuberculosis (Animals) Compensation Bill, 1904.

On June 28th I presented the following report to your Sanitary Committee with reference to the above Bill :—

" The above Bill, now before Parliament, was referred by the House of Commons on June 8th to a Special Committee for consideration and report. It was suggested to the London County Council that it was desirable that a Conference should be held of representatives of the various County and County Borough Councils in the country at the earliest possible date, with a view to uniformity of action being taken with regard to the measure.

That Council, therefore, on June 14th, summoned at short notice a conference to be held in London on June 17th.

There was no time for the invitation to this Conference to be laid before your Committee, and after consultation with your Chairman he suggested that I should attend the Conference; and this I did. Although summoned at such a short notice over 80 Counties and County Boroughs were represented, many representatives coming from the North of England and Scotland.

The object of the Tuberculosis (Animals) Compensation Bill is to provide for the payment of compensation to the owners of carcases of animals condemned after slaughter, and destroyed by order of a Magistrate on account of tuberculosis. This Bill does not propose any new method of examining for tuberculosis, but only provides for compensation for the full value of the carcase condemned after slaughter to be paid to the owner of such carcase, the amount of such compensation being determined by the Magistrates ordering the destruction of the carcase. All compensation so ordered is to be charged against and paid by the Council of the administrative county or other authority concerned within whose area of jurisdiction the animal was slaughtered. At the present time, under the Public Health Act, provision is made for unsound food (which would include a carcase) to be seized and destroyed at the instance of sanitary authorities. This does not, however, in any way contemplate the payment of compensation to the owner of such food, and the Bill therefore proposes quite a new departure; and it is difficult to see what ground exists, particularly having regard to the recent report of the Royal Commission on Tuberculosis, for treating the owners of carcases destroyed on the ground of their being tuberculous, differently from the owners of carcases of other food destroyed for other reasons. Further, it would appear from the Bill that a Magistrate may allow in some cases of diseased carcases not merely the value of the carcase as diseased meat, but the *full value* of such carcase as if it were not diseased. This is a matter which is touched upon in the report issued by the Royal Commission of 1898 on Tuberculosis, in which it was pointed out that not only could butchers insure against purchasing diseased meat, but that in buying carcases they were taking a trade risk, and if successful would take all the profit, and consequently if purchasing carcases subsequently found to be diseased they should have to bear the loss if not covered by insurance. The effect therefore of the Bill in question would be to transfer the risk, in cases of animals apparently healthy when alive, from the trade to the Council.

The London County Council has presented a petition against the measure.

After lengthy discussion the Conference passed the following resolution by 34 votes to 8:—

"That in the opinion of the Conference the principle of compensation embodied in the Tuberculosis (Animals) Compensation Bill is contrary to sound public policy."

And it was agreed that the resolution should be submitted to the Select Committee of the House of Commons which has charge of the Bill. It was also arranged that eight witnesses from the Conference should give evidence before the Committee in support of the resolution.

It may be easy to assent to the proposition that in the cases under discussion some compensation is reasonable.

It is not, however, easy to assent to the proposal embodied in the bill that the compensation should be *full* compensation.

That a purchaser shall be absolved from all risks in regard to the purchase is contrary to the prevailing principle of English law; it would further be, in a measure, placing a premium on speculation in cheap animals.

Also, it is not easy to assent to the proposal, embodied in the Bill, that the compensation should come out of local rates, the rates, that is, of the place where the animal is killed, and not of the place where the animal is reared or where the meat may be eaten; the compensation should come either wholly or partially from insurance funds among the trade concerned or else Imperial funds (the Royal Commission on Tuberculosis recommended mutual insurance).

I believe that these views will be found to be those of your Committee.

Your Committee might perhaps think the matter of sufficient importance to take some step in regard to the Bill now before Parliament, either by directing the attention of the Representative of the City to the matter, or in some other way insuring its views being expressed."

Your Sanitary Committee resolved to endorse the resolution passed at the Conference, and further expressed their opinion that compensation should be paid in proper cases from the Imperial Exchequer; and further resolved that this resolution should be communicated to the Member for the City.

The Bill was not passed through Parliament.

Diseases of Animals Acts and Orders of the Board of Agriculture.

Inspector Clarke, the Inspector under these Acts, supplies the following information:—

" There has been no outbreak of any of the scheduled contagious diseases at any place within the City boundary during the past year.

Two suspected cases of Swine Fever were reported to the Board of Agriculture, who after due investigation found the animals were free from the disease.

The regulation for the movement of swine into the City, and the periodical cleansing and disinfection of pig dealers' premises and vehicles continues in operation with satisfactory results.

New Orders affecting this district have come into force during the year, and relate to the paving, cleansing, and disinfecting of Markets and Sale Yards (Markets and Fairs Order, 1903) and the special construction of railway trucks for the carriage of animals therein (Transit Order, 1904).

An important Order has also been issued by the Board of Agriculture relating to movement of swine from Ireland, and its effect will be, on and after January 23rd, 1905, to restrict the landing of swine from Ireland for slaughtering only.

Handbills, circulars and posters have been issued concerning the Epizootic Lymphangitis Order, and the cutting up of Anthrax carcases.

The Veterinary Inspector attending the Cattle Sales and Markets has caused several unthrifty animals to be isolated from the healthy, but no contagious disease has been discovered among the animals exposed for sale at the Sale Yards and Markets."

Canal Boats.

Inspector Clarke, the Inspector under the Canal Boats' Acts, furnishes the following information on this subject:—

"The number of boats inspected during the year was 125; of these, 51 were worked by men only, and 74 by men, women, and children.

Infringements of the Acts and Regulations had reference to:—Absence of Certificate, 1; marking, 1; cleanliness, 2; painting, 5; bilge water, 1; water vessel, 1; and dilapidations, 6.

Eight notices and 21 letters were sent to the various defaulters, and verbal instructions were given in numerous instances with regard to ventilation.

Five boats have been added to the Register, making a total of 254 in use, 43 having been cancelled.

There has been a general improvement noticeable in the condition of the boats and their occupants, but it is to be regretted that, while legislation has been progressive in other directions for the betterment of the workers, no amendment has been made during the past 20 years in the Canal Boat Regulations. Has not the time arrived for preventing the presence of women and children on board the cabins of canal boats, where the regulation cubic space allowed per person is less than one-fourth the cubic space allowed per person for sleeping purposes in a Common Lodging House?

During the past year 51 women and 81 children were found on board the boats inspected by this authority.

H.M. Inspector of Canal Boats paid surprise visits here, and after examining the Register and necessary books, visited the waterway and expressed his satisfaction as to the steps taken by the Sanitary Authority to give effect to the Acts and Regulations."

Water Supply.

Your Waterworks Engineer kindly informs me that during the twelve months 597,714,119 gallons of water have been supplied by your Corporation Water Works to your City; of this amount 318,684,468 gallons were derived from Spon End, and 279,029,651 gallons from Whitley; and that the following new services have been laid on: houses connected, 889; water closets, 978; baths, 140; various, 61.

This amount corresponds to a daily consumption of 1,633,098 gallons.

This gives an average consumption of 22 gallons per head per day. The comparison of this figure with that of previous years is given below:—

	Amount supplied per day.	Estimated population served.	Amount per head per day.
1897 ...	1,420,000 gals. ...	61,234 ...	23 gals.
1898 ...	1,577,207 ,, ...	61,555 ...	25 ,,
1899 ...	1,723,926 ,, ...	61,796 ...	27 ,,
1900 ...	1,896,106 ,, ...	62,037 ...	30 ,,
1901 ...	1,649,292 ,, ...	62,200 ...	25 ,,
1902 ...	1,670,749 ,, ...	62,573 ...	26 ,,
1903 ...	1,678,461 ,, ...	68,045 ...	24 ,,
1904 ...	1,633,098 ,, ...	73,904 ...	22 ,,

During the year the water from the different sources of the public supply has been analyzed monthly by the City Analyst, Dr. Bostock Hill; the result of each of these analyses has been presented to your Waterworks and Fire Brigade Committee, together with a report on the analysis by myself. The results of these analyses are here set out. The slight alterations which occur in the samples from month to month can in this way be easily noted. So far as pollution with fresh organic matter is concerned, the figures show the samples to be remarkably free. In the Whitley water the amount of nitric nitrogen, indicating past pollution with organic matter now oxydised into nitrates, has been higher than it is desirable to see in a public water supply; this peculiarity of the Whitley water I have previously noticed in my reports to your Committee on several previous occasions.

In February of last year I reported to your Waterworks and Fire Brigade Committee concerning some water that was flowing into the tank at Spon End from a pipe which was supposed to lead from the Conduit Springs on the Holyhead Road; these springs are situated near the Holyhead Road, and are at a distance of 1,764 feet from the tank; no water had been observed to enter the tank by the above-mentioned pipe for some years. The analysis of the water taken directly from one of the springs is given below :—

Total solid impurity	54	parts per 100,000
Free Ammonia	.001	
Organic Ammonia	.002	
Nitrogen as Nitrates and Nitrites	trace	
Oxygen absorbed in 4 hours ...	.028	
Chlorine	1.8	

This shows this water to be a hard water, but remarkably free from organic pollution. The sample taken from the pipe entering the tank differed in composition and in purity. It either brought water from some other source, or some other water gained access to the pipe in its course. The entrance of water to the tank by this pipe soon afterwards ceased.

The Conduit Springs—I am informed—formed at some earlier time a part of the source of supply for the City. I have no information as to what amount of water they will yield. Very little is known as to the course or condition of the pipe which is supposed to lead from them to the Waterworks at Spon End. As a possible means of increasing to some extent and at little cost the City's supply, the examination of this pipe was sug-

Results of Analysis expressed in parts per 100·000.

WHITLEY WATERWORKS.

Date of Receipt of Sample.	Total Solid Impurity.	Free Ammonia.	Organic Ammonia.	Nitrogen as Nitrates and Nitrites.	Oxygen absorbed in Four Hours.	Chlorine.	Hardness.			Remarks.
							Temporary.	Permanent.	Total.	
1904.										
Jan. 9	58	0	·002	·55	·012	3·4	3·44	20·66	24·10	Bright, few small particles
Feb. 5	64	·001	·003	·44	·021	3·6	5·62	21·24	26·86	,, ,, ,,
Mar. 7	68	·001	·001	·55	·008	3·7	5·61	21·63	27·24	,, ,, ,,
April 11	60	·001	·002	·38	0	3·8	4·88	20·16	25·04	,, ,, ,,
May 6	64	·001	·002	·44	·002	3·6	5·88	21·22	27·10	Clear, many small particles
June 6	60	0	·002	·44	·007	3·6	5·42	21·00	26·42	Clear, few small particles
July 6	70	0	·002	·44	0	3·8	7·20	19·50	26·70	,, ,, ,,
Aug. 8	60	0	·002	·44	0	3·6	5·52	17·66	23·88	Clear, many small particles
Sept. 2	66	·001	·002	·33	·012	3·8	6·06	19·04	25·10	Pretty clear, with many small particles, & few green particles
Oct. 6	60	0	·001	·44	·050	3·6	3·60	21·20	24·80	Clear.
Nov. 4	64	·002	·001	·33	0	3·6	6·92	17·84	24·76	Pretty clear, many small particles
Dec. 8	66	0	0	·44	0	3·5	7·64	18·22	25·86	

DOEBANK WELL, SPON END.

1904.										
Jan. 9	50	·001	·004	·11	·017	2·5	10·46	18·16	28·62	Bright, many small particles
Feb. 5	58	·001	·004	·22	·015	2·7	11·42	18·42	29·84	,, ,, ,,
Mar. 7	60	·001	·002	·11	·008	2·7	11·32	18·70	30·02	,, ,, ,,
April 11	68	·001	·002	·22	0	3·1	13·48	19·20	32·68	,, ,, ,,
May 12	60	·001	·001	·22	0	3·0	12·02	18·62	30·64	Clear, few small particles
June 6	58	0	·002	0	0	2·5	11·42	18·60	30·02	,, ,, ,,
July 6	60	·001	·002	·22	0	2·6	11·50	10·70	22·20	,, ,, ,,
Aug. 8	66	·001	·002	·11	·046	3·4	12·38	10·84	23·22	Bright, few small particles
Sept. 2	56	·001	·002	·22	·003	2·6	10·69	10·52	21·21	,, ,, ,,
Oct. 6	50	.001	·001	·22	0	2·3	10·84	14·28	25·12	Clear
Nov. 4	56	·001	·001	·11	·012	2·3	13·31	10 96	24·27	Pretty clear, many small particles
Dec. 8	54	·001	0	·27	·002	2·4	14·14	11·10	25·24	Clear

TANK, SPON END.

1904.										
Jan. 9	48	·001	·002	·36	·019	2·0	8·08	12·64	20·72	Bright, many small particles
Feb. 5	48	0	·002	Trace	·023	2·4	7·66	12·76	20·42	,, ,, ,,
Mar. 7	46	·001	·003	·22	·014	1·9	8·74	12·26	21·00	,, ,, ,,
April 11	40	·001	·001	·16	·033	1·9	9·24	12·18	21·42	Bright, few small particles
May 6	48	·002	·001	·22	0	1·8	9·74	12 46	22·20	Clear, few small particles
June 6	44	·001	·002	·27	·002	2·0	9·46	12·14	21·60	,, ,, ,,
July 6	50	·001	·002	·33	0	2·1	7·40	12·00	19·40	,, ,, ,,
Aug. 8	40	·001	·001	·33	·046	1·8	7·30	11·82	19·12	Bright, few small particles
Sept. 2	58	·003	·002	·165	0	1·7	11·22	10·21	21·43	Bright, many small particles
Oct. 6	46	0	0	·22	0	2·0	7·48	13·72	21·20	Clear
Nov 4	40	·001	002	·22	0	1·8	8·56	11·64	20·20	Pretty clear, many small particles
Dec. 8	56	0	0	·22	0	1·5	10·64	11·42	22·06	Clear

gested to your Waterworks Committee; and that Committee ordered that this should be done.

My Report for 1903 contained the following: "On previous occasions I have reported that the tank at Spon End is not all that it might be as a receptacle for drinking water, which is not subsequently filtered. Its present limewashed walls get very dirty in the intervals between the cleansings. Such walls cannot be easily cleansed. This difficulty would be removed if the walls were lined with glazed bricks or other similar material. The tank should also be covered in above; this would lessen the tendency that exists for the growth of vegetable matter, as well as prevent the possibility of stones being thrown into the tank from an adjoining street, which now sometimes occurs. Further, the possibility of the drainage from the surrounding basin of land in times of heavy rains finding its way into the tank should be obviated; the entrance of extraneous impurities into a public supply of water should be rendered absolutely impossible." These observations remain appropriate to-day.

Private Water Supplies.

Some further progress has been made during the year in the matter of excluding from use those private wells whose water is unfit for use for drinking purposes; and in getting the public supply laid on to houses which are not supplied with a pure water.

Samples of water from 61 private wells have been taken, and subsequently analysed. Of these 47 have been condemned as unfit for use for drinking. As a result of this action 10 wells have been permanently closed; and 178 houses have been connected with the public supply. In some cases owners have been reluctant to permanently close wells, stating that the water will be of use for gardening and such-like purposes. Where it has been clear that the water would only be used for such purposes, the wells have been allowed to remain.

So far as is known the number of houses remaining, and which are wholly supplied with well water, approximates to 527.

Insufficient Water Supply in Courts.

It has been the custom in courts to provide one tap to meet the needs of several houses. In some cases this has been practised to an extreme and undesirable extent. On this matter I reported to your Sanitary Committee on October 4th as follows:—

"It is probably well known to your Committee that in the supply of the smaller houses, especialy those in courts, with water, it is the common practice to cause one tap to serve the purposes of several or even many houses. No steps have hitherto been taken to limit the number of houses which shall be supplied by the same tap, and yet it has appeared to me that to allow an unlimited number of houses to be supplied with one tap is not only a source of inconvenience to the householders, but frequently must act in a prejudicial way in causing them to use less water for domestic and cleansing purposes than they otherwise would if the water were more accessible. Where the houses are scattered by distance the inconvenience is probably much more keenly felt than when they are situated closely together.

To mention some instances which come first:—

In Court 8, Jordan Well, there are 13 houses using one tap.

In Court 11, Gosford Street, there are 25 houses using two taps.

In Leicester Street and Brewery Street there are 15 houses using one tap.

In Court 13, Spon Street, there are 23 houses using one tap.

In Court 3, Spon End, there are 16 houses using one tap; one of these houses is a public-house.

In Court 1, Hertford Place, there are 27 houses using one tap.

The question on which I should be glad to receive the opinion of your Committee is as to what supply of water you would consider to be sufficient, or in the words of the Public Health Act, "proper."

If your Committee expressed an opinion to the effect that one tap should not suffice for more than a certain number of houses, *e.g.*, six, then it would be possible to bring cases where this number was greatly exceeded to your notice, and if your Committee so ordered, the owners could be called upon to provide a "proper supply."

According to section 62 of the Public Health Act, the report on these matters has to be made to your Committee by the Surveyor; and if your Committee expressed an opinion on the general question I would draw the attention of the City Engineer to cases coming to my knowledge where the houses were in excess of any provisional standard fixed by your Committee, so that he could report to your Committee."

Your Sanitary Committee expressed the opinion that not more than eight houses should be supplied with one tap.

The above-mentioned instances, together with others which have come to light since the date of that report, have been communicated to the City Engineer, who has reported that the supply is not a "proper" one; and the number of taps available has been increased.

It is probable that at some future time a more abundant supply than one tap to eight houses may be regarded as essential.

Refuse Removal.

Your City Engineer has kindly informed me that during the past two years the following amounts of house refuse have been removed:—

1903.	Cubic yards.		Cart loads.
Ashpit refuse removed	12,760	=	6,380
Ashbin ,, ,,	28,338	=	14,169
	41,098	=	20,549

1904.	Cubic yards.		Cart loads.
Ashpit refuse removed	11,903	=	5,951
Ashbin ,, ,,	30,897	=	15,449
	42,800	=	21,400

It will be noted that the amount of refuse from ashpits is being gradually reduced on account of the steady abolition of the old-fashioned and objectionable ashpit. During the past ten years no less than 1,797 such ashpits have been abolished, and 3,143 sanitary dustbins have been substituted for them; in addition 2,337 bins have been provided for houses which were not provided with proper receptacles for refuse.

I regret that I am unable to record any alteration in the system of disposal of refuse by tipping it in huge accumulations on and around the confines of the City. The many objections to the practice I have frequently reiterated in previous reports. I believe that most are agreed on the existence of these objections, and that the matter under consideration at the present time is the selection of a suitable site for a destructor. The question has, however, been under discussion for a long time. I take the following quotation from the Annual Health Report of 20 years ago—that for 1884:—

"*Disposal of refuse.* The usual difficulty has been experienced in connection with the disposal of ashpit refuse as to "what to do with it." The system of depositing it in some out of the way place until a considerable nuisance is created, and then moving on to a fresh spot, there to repeat the operation, is most unsanitary and dangerous. I would direct your attention to my report made to the General Works Committee in April, concerning the Refuse Destructors in use at Bradford, where, in company with a deputation from your Committee, I had an opportunity of witnessing these furnaces at work. The deputation was quite satisfied as to the complete destruction of the débris without the slightest nuisance, and was pleased to find the resulting carbonized material being ground into mortar with lime, the sale of which defrayed the working expenses."

Sewage Disposal.

The sewage is disposed of by broad irrigation on the Sewage Farm at Baginton, some two miles outside the City.

To reach that farm it has to be pumped by the pumping station at Whitley. I am led to understand that the effluent obtained has been satisfactory, and that the main purpose of the farm is successfully accomplished.

Drainage of Foleshill and Stoke.

The progress that is made with the better drainage of the houses in the "added area" of 1899 is gradual. It seems slow. The sewerage system in Foleshill was completed in 1902 and 1903. That in Stoke has only recently been commenced. Until the system of sewers in Foleshill was complete, little progress could be made with the conversion of the large number of offensive privy-middens which existed in that area. Most of the "conversions" that have taken place in the last five years have been in that area; the number in 1900 was 42; in 1901, 8; in 1902, 62; in 1903, 122; in 1904, 211; the large amount of this work has therefore been done since the completion of the sewers. In all, 445 new w.c.'s exist now in the place of old offensive privy-middens. This work is done entirely at the expense of private owners. Much remains to be done.

At the time of annexation in 1899, I estimated that there were 640 houses in the Foleshill district draining into the Canal; at the present time I estimate that there are still at least 365 houses in this district draining into the Canal. It might have been hoped that at a time nearly eighteen months removed from the completion of the sewerage system, this would not have been the case. The diversions of sewage from the Canal to the new systems of sewers have mostly been brought about by verbal suggestions of your Health Department, when owners have been reconstructing or laying down drains to their existing premises; to a small extent they have been brought about on the personal initiative of owners. Where there are no new drains to be laid, or where there is no reconstruction to be done, it is not reasonable to expect owners to go to the expense of diverting their drains from the old sewer—leading to the Canal—when that old sewer answers their requirements. The cost should clearly be paid out of public funds. I understand that this principle has now been recognized, and that a loan is to be applied for to enable this to be done.

So far as is known to the Health Department, the houses now draining into the Canal are situated as follows:—

Stoney Stanton Road ...	... 93	houses.
Eden Street ...	... 30	,,
Edgewick Street ...	... 24	,,
Broad Street ...	... 21	,,
Princess Street ...	... 16	,,
Station Street East to summit ...	55	,,
Total ...	239	

and, in addition, various stables and a slaughterhouse are connected to sewers, the outfall of which discharges into the Canal near Navigation Bridge.

Since the above statement was written a connection has been made between this outfall sewer leading to the Canal and the new sewerage system, whereby some of the sewage finds its way into the new sewers, and the overflow goes into the Canal.

Also,

Foleshill Road ...	38 houses;	10 w.c.'s.
Broad Street ...	77 ,,	
St. Paul's Road ...	11 ,,	11 ,,
Webster Street ...	16 ,,	

are connected to sewers, the outfall from which discharges into the Canal near Prince William Henry Bridge.

In addition to the above, which can be diverted into the waiting sewers at any time, there are others which lead into open watercourses, and which can also be diverted. The following premises are connected to old sewers discharging into the Cosham Tank, which overflows into the Springfield Brook:—

Lockhurst Lane ...	65 houses, 8 w.c.'s, a factory, and several stables.
Drake Street ...	1 house and a factory.
Welford Place ...	11 houses and 11 w.c.'s.
Station Street East	50 houses and 9 w.c.'s.
Highfield Road ...	35 houses and 2 w.c.'s.
Station Street West	43 houses and 15 w.c.'s.
Total...	227 houses, 51 w.c.'s, 2 factories, stables, etc.

Also 18 houses in Lockhurst Lane are connected with an open sewer or ditch, which discharges directly into the Springfield Brook.

Also 77 houses, 11 w.c.'s, 1 laundry, a foundry, and some schools, and various stables are connected to sewers, the outfalls from which discharge into the Spring Brook, Little Heath. A complaint concerning this last outfall of sewage has recently reached your Sanitary Committee, and been referred by that Committee to your General Works Committee, which Committee I understand is now giving it consideration.

It is greatly to be desired that no further delay should occur in diverting the sewage of these houses from the public water-courses of the City; so that in this way the district may receive the fullest advantage from the sewerage system which exists.

Public-Houses.

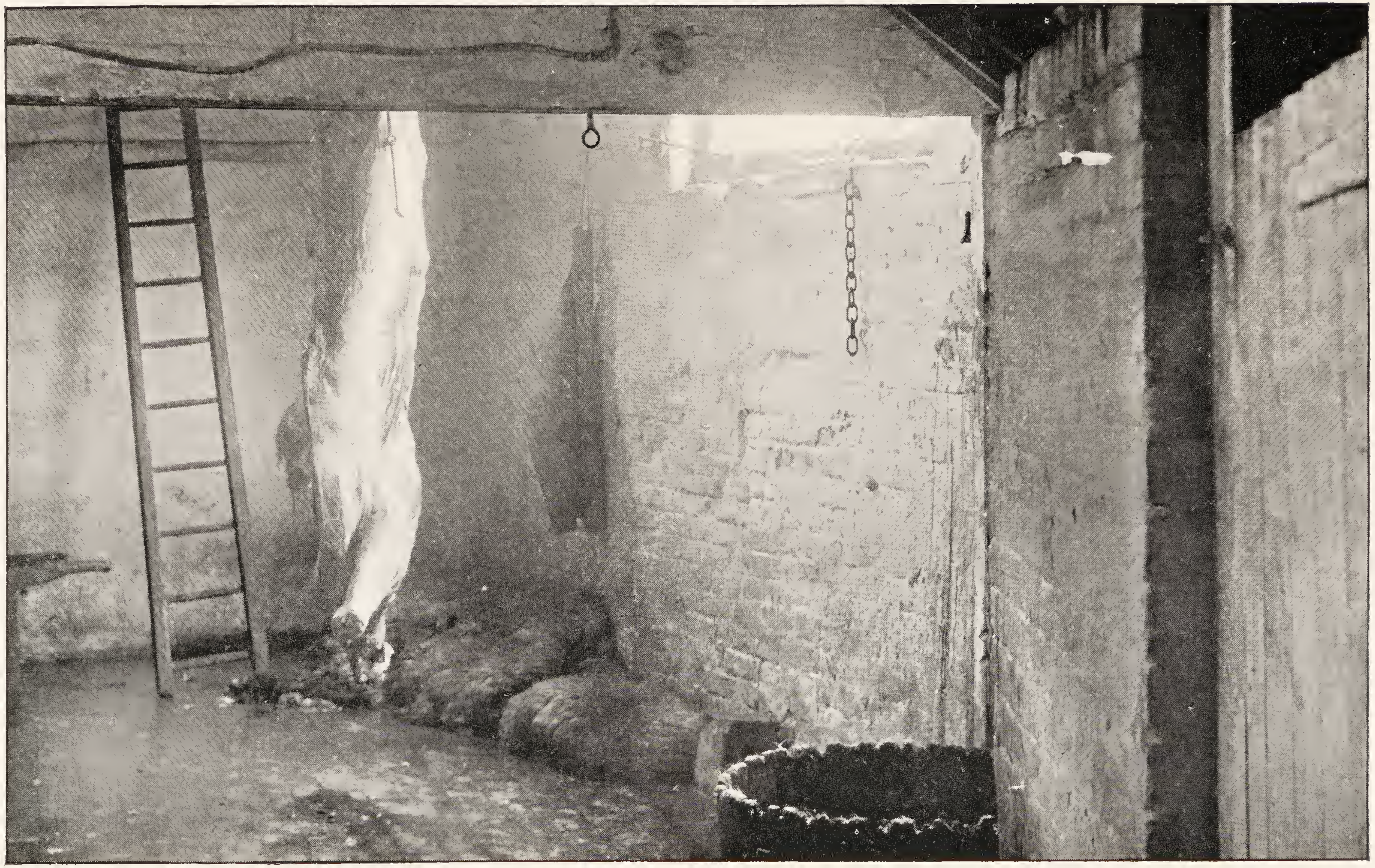
In the early portion of the year I brought to the attention of your Sanitary Committee the fact that in certain cases alterations were being made to public-houses—to meet the requirements of the Licensing Justices—which presented grave objections from a sanitary point of view. These were generally in those cases where the back doors of the houses opened into common courts. In some instances the action which was being taken was to block up the back doors, thus making the only means of ingress and egress by the front door; it is only necessary to mention the domestic requirements of a house in regard to access to sanitary conveniences, ashbin, drying ground, yard gulley, etc., quite apart from the question of ventilation and egress in case of fire, to make it clear that such a course might be reasonably objected to on grounds of sanitation. In consequence of this representation, some conferences were held between representatives of the Licensing Justices and your Sanitary and General Works Committees. At these conferences the following resolution was adopted :—

"In the opinion of this Conference plans of licensed premises, whether new or for large or minor alterations, should be deposited in duplicate, one with the Clerk to the Justices, and the other with the City Engineer, for submission to the General Works Committee; after deposit the City Engineer and Chief Constable should confer together with a view of the plans being made to satisfy the requirements of the Police Authority and the Sanitary Authority, and that afterwards the plans should be next submitted to the Justices, the General Works Committee afterwards finally approving."

I am given to understand that this course has since been adopted. It may be anticipated that the results of this combined action may be satisfactory. The objectionable features presented by one or two of the earlier alterations remain as they were.

Coventry Fairs.

As usual in connection with the Whitsuntide Fair the vans were visited, and certain particulars obtained concerning their



Interior of Private Slaughter House.

occupants, their condition as regards health, and the previous places visited. The number of living vans was 40, against 39 in the previous year; there were 115 occupants, against 118 in the previous year; there were also about 180 other persons employed at stalls, etc., in the Fair, who were not dwelling in the vans. No introduction of infectious disease could be traced to the holding of the Fair.

The Shop Hours Acts, 1892-1895.

The object of these Acts is to prevent the employment of young persons for such an excessive number of hours as will prejudice the health of these employees. The Seats for Shop Assistants' Act, 1899, requires the provision of a certain number of seats to be provided in those shops where female assistants are employed. These Acts are not enforced in this City, for the reason that your Council has appointed no one to enforce them. This matter is further referred to in this report under the heading of a "Female Health Visitor."

Female Health Visitor.

This matter—the question of the appointment of a Female Health Visitor—has been periodically before the attention of your Sanitary Committee since 1901, when an experimental appointment for six months was made, and was in every way a success. It only rests with me to record what has been done in the matter in 1904. On December 22nd, 1903, a letter came before your Sanitary Committee, being referred to it by your Council, from the Coventry Branch of the National Amalgamated Union of Shop Assistants, Warehousemen, and Clerks, concerning the fact that in your City the Shop Hours' Acts had never been put into operation because no inspector had been appointed with power to enforce them. On the consideration of this letter by your Sanitary Committee, it was resolved that its further consideration should be adjourned until the question of the appointment of a Female Health Visitor should be gone into in March, 1904.

This question did not arise in March, but came up again on the consideration of the Annual Health Report for 1903 on July 12th, 1904; it was then resolved that the question of the appointment of a Female Health Visitor should be adjourned. On September 6th a further letter from the above-mentioned Union was received, having relation to the same subject; it was then resolved that the consideration of this letter should be adjourned until the question of appointing a Female Health Visitor came up for consideration.

I have frequently detailed the great advantages which might be derived from the employment of a Female Health Visitor; she would be of use in giving advice in those instances where cases of infectious disease were nursed at home as to the most effective methods of isolation; she would be especially of importance in the visitation of workshops where females are employed; a Female Health Visitor is a much more appropriate person to employ, in gaining admission to small houses to attempt to inculcate methods of cleanliness, than is a male inspector; she can be of use in giving advice concerning the artificial feeding of infants in cases where natural feeding is impossible, and where the advice of a medical man is not available; she can be of use in supplementing, and even in reading the printed advice which is now distributed to all houses on this subject, where this assistance is necessary; she can be of use in visiting houses where home-work is carried on; at the present time this work is very much neglected on account of the lack of available staff, as will be seen by the poor return of the work which is made in the table dealing with the Factory and Workshop Act. There is now one other important matter which, in a town such as this, would in the natural order of events fall to a Female Health Visitor, viz., the visiting and inspection of the methods of conforming to the Rules adopted by the various midwives; this highly important matter is receiving different amounts of attention in different districts, according to the importance attached to it by the different supervising authorities; *e.g.*, in Manchester a whole-time Female Medical Practitioner has been appointed to do nothing else than supervise the work of the midwives, under the direction of the Medical Officer of Health.

Food and Drugs.

In accordance with the provisions of the Sale of Food and Drugs Acts, 201 samples were examined by the Public Analyst; of these 11 were reported against, and legal proceedings instituted for 9 contraventions, the total amount of fines and costs being £10 6s.

It will be seen that the number of samples analysed is greater than in any previous year, and gives an average of one sample to every 370 persons, as compared with one for every 478 of the population in the provinces.

The samples included New Milk, 107; Butter, 35; Margarine, 7; Bread, 2; Lard, 3; Coffee, 2; Jam, 1; Sweets, 2; Pepper, 5; Brandy, 7; Whiskey, 3; Condensed Milk, 3; Mustard, 1; Cocoa, 1; Malt Vinegar, 2; Compound Tincture of Rhubarb, 2; Compound Liquorice Powder, 2; Olive Oil, 3; Cod Liver Oil, 2; Sweet Spirits of Nitre, 3; Camphorated Oil, 2; and one each of Sal Volatile, Tincture of Iodine, Cream of Tartar, Ipecacuanha Wine, Crushed Linseed, and Castor Oil.

Of the 107 samples of New Milk dealt with, 102 proved to be genuine, the proportion condemned being 4.6 per cent. as compared with 10.4 per cent. for the whole country. The worst sample of milk contained 19 per cent. of added water; another sample contained 8 per cent., while two samples were deficient respectively of 29 per cent. and 7 per cent. of their normal quantities of fat, calculated on the low standard of the Board of Agriculture, the vendors in each case being prosecuted.

As regards the 35 samples of butter only one was found to have been tampered with, and this was made a basis for proceedings under the Margarine Act.

Three of the ten samples of spirits were found to be diluted below the standard; but in each case a sufficient disclosure of the fact of dilution was considered to have been made to the purchaser to satisfy the Act.

One sample of Sweet Spirits of Nitre was slightly deficient of Ethyl Nitrite; otherwise the drugs submitted were returned as genuine.

The results of the prosecutions are given on page 106. It will be noticed that the fines imposed for selling adulterated food or for selling improperly labelled Margarine are very small. Where the adulteration is carried out knowingly and systematically, the profits obtained at the expense of the consumer must be sufficiently large to render these fines nugatory as a deterrent force.

References to other Departments.

These included 532 references to the City Engineer, 103 to the Waterworks Engineer, and 365 to the Education Department.

The character of the references to the City Engineer is set out in the following table :—

Unauthorized erections	19
Dangerous buildings and chimneys ...	28
Dangerous condition of roads and pavement	7
Foul gullies in courts	69
Foul and defective street gullies ...	14
Complaint of stench from open manhole covers to sewers	29
Foul and obstructive sewers	31
Ashpits and ashbins requiring emptying	254
Privies and cesspools requiring emptying	80
Sewage discharging into canal ...	1
	532

The references to the Waterworks Engineer dealt with such matters as waste of water from taps and cisterns.

References to the Education Department have related to children who have suffered from infectious disease, or who live in houses where infectious disease has existed.

The Inspection of the District and the Sanitary Staff.

The bulk of the work done by the Health Department is of a routine character. It consists of the suppression of nuisances, and in general the correction of sanitary defects in and around dwellings. This work can best be set out in tabular form :—

Drainage and Pavement.

Drains opened and cleansed from obstruction ...	208
Drains provided with efficient traps	371
New drains and intercepting chambers provided...	194
Drains relaid	172
Sink drains, etc., disconnected from sewer ...	13
New sinks provided	22
New sink waste pipes provided and others repaired	40
Drains tested	438
Soil pipes improved	36
Courts and back yards paved and repaired ...	176

DWELLINGS.

Floors of houses relaid or repaired	308
Dilapidated walls and ceilings repaired	135
Damp walls—damp courses inserted	16
Roofs repaired and made weatherproof	163
Dangerous stairs repaired	31
Additional windows provided and others made to open	64
Defective spouting repaired	147
Houses limewashed and cleansed	325
Houses limewashed after infectious disease ...	125
Cases of overcrowding dealt with	23

WATER CLOSETS AND URINALS.

Additional w.c's. provided	108
Water closets reconstructed	23
Water closets repaired and limewashed	231
Water closets provided with new basins and traps	115
Defective joints in pans and traps and flush pipes repaired	87
Foul w.c. basins and drains cleansed	293
Defective w.c. cisterns repaired	184
New flushing cisterns provided	46
Urinals cleansed and reconstructed	27

PRIVIES, ASHPITS, AND DUSTBINS.

Offensive privies and pail closets converted into w.c's.	211
Offensive ashpits abolished	210
Sanitary dustbins provided in place of above ...	405
Other houses provided with sanitary dustbins ...	152

VARIOUS.

Smoke nuisances dealt with	39
Nuisances from animals kept abated	99
Accumulations of manure removed	64
Miscellaneous	173
	5,474

The following works have been carried out by this Department, and the costs thereof recovered in the manner provided by

Summary of Inspector's Work.

IN CONNECTION WITH THE SUPPRESSION OF NUISANCES FOR THE PAST TEN YEARS.

	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	Total for 10 years.
No. of drains opened and cleansed from obstruction ...	89	95	94	91	87	157	169	124	208	208	1,322
,, drains provided with efficient traps	205	377	328	404	257	246	374	350	247	371	3,159
,, new drains provided to premises	30	69	47	41	19	33	15	307	360	194	1,105
,, sink drains disconnected from the sewer	31	12	27	17	8	42	37	18	11	13	216
,, new sinks provided and others repaired						56	48	42	21	62	229
,, floors of houses relaid or repaired...	9					295	298	228	320	308	1,449
,, roofs of houses repaired and made weatherproof...						104	67	130	130	163	617
,, defective spouts repaired						63	65	133	138	147	546
,, houses limewashed and cleansed	255	175	302	344	422	721	301	271	317	325	3,433
,, houses cleansed after infectious disease					115	174	623	228	222	125	1,487
,, offensive privies or pail closets converted into water closets...	10	58	10	39	17	42	8	62	122	211	579
,, offensive privies converted into pail closets ...						81	62				143
,, additional new water closets provided	11	8	19	26	71	61	54	177	188	108	723
,, water closets provided with new cisterns... ...	488	411	108	451	342	91	31	63	91	46	430
,, ,, ,, ,, ,, new basins and traps						105	85	138	166	115	2,625
,, foul water closet drains cleansed			329			302	254	395	321	293	1,565
,, defective W.C. cisterns, etc., repaired						369	159	389	216	184	1,317
,, offensive ashpits abolished...	77	110	77	20	434	274	236	171	188	210	1,797
,, sanitary dustbins provided in place of the above					701	723	539	327	448	405	3,143
,, ,, ,, ,, to other premises ...				252	436	423	408	490	176	152	2,337
,, urinals cleansed, repaired and reconstructed ...	35	26	39	38	14	19	25	30	24	27	277
,, courts and backyards paved and repaired ...	40	68	81	92	64	48	68	101	182	176	920
,, nuisances from animals kept abated	68	40	15	19	28	16	45	78	92	99	500
,, accumulations of manure, etc., removed	61	34	35	39	27	39	43	29	44	64	415
,, smoke nuisances dealt with	6		30	18	23	25	20	23	22	39	196
,, cases of overcrowding dealt with	3	11		5	25	15	11	6	31	23	130
,, vent and soil pipes removed or replaced and miscellaneous sanitary improvements effected	47	138	5	57	73	93	613	309	170	1406	2,911
	1,465	1,632	1,546	2,096	2,462	4,417	4,658	4,629	5,469	5,474	3,3642

Summary of other Miscellaneous Work

FOR THE PAST TEN YEARS.

	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904
No. of visits and re-visits to premises	10,300	12,120	12,936	13,381	12,805	23,275	19 244	18,039	17,244	15,491
,, notices issued for abatement of nuisances ...	1,123	1,085	1,116	1,384	1 612	2,957	2,966	2,023	2,285	1,566
,, letters ,, ,, ,, ,, ...				225	330	392	402	462	467	327
,, summonses issued for non-compliance with notices served to abate nuisances	3		8	3	5	12	5	4	0	4
,, nuisances remaining unabated after expiration of notice	5	12		10	10	9	6	32	36	25
,, registered premises under supervision	343	341	311	329	349	377	388	396	405	423
,, visits paid to registered premises...	1,782	1,546	1,299	1,379	1 291	1 863	1 310	1,635	1,985	2,558
,, references to City Engineer		1,027			1,148	910	782	699	648	532
,, references to Water Engineer					79	236	178	227	138	103
,, drains tested						32	65	113	414	438

the Public Health Act, the owners having failed to comply with the notices served to abate nuisance :—

Three additional water closets erected as per contract	£30 0 0
Two privies converted into water closets, and new drains constructed and connected to the sewer	£25 0 0
Four privies abolished—seven new water closets erected—new drains constructed and connected to sewer ; 17 houses repaired and cleansed, and town water laid on to four taps	£219 0 0

So far as the work is capable of tabulation, the number of visits and other work involved is shown in the following table :—

Number of visits to premises	15,491
Number of notices issued	1,566
Number of letters issued	1,247
Number of summonses issued for non-compliance with notices to abate nuisances	4
Number of nuisances remaining unabated after expiration of notice	25
Number of registered premises under supervision (not including workshops)	423
Number of visits paid to registered premises	2,558

A considerable amount of the time of the Inspectors has been taken up in supervising structural and drainage work in progress, especially in the added area of 1899, where 211 privies have been converted into water closets, and the drainage of 361 houses has been relaid and connected to the new sewers. It will be seen that the work in connection with the testing of the drains of houses is increasing from year to year. This is done with a smoke machine, and it is only during the past five years that this has been done at all. As it is becoming known that this is carried out by the Health Department without charge, the requests are becoming more and more numerous, especially in connection with the larger class of houses; the work, however, involves a considerable amount of time, which is not fully represented in the tabulated figures. An Inspector engaged in this work requires the assistance of a labourer; until now it has been usual to obtain this assistance from the Department of the City Engineer; the whole time of one labourer could be easily occupied with work of this kind undertaken by the Department.

A considerable amount of the time of the Assistant Inspectors is also occupied in making enquiries in connection with cases of infectious disease notified by medical men, or reported from schools.

To compare the work with that of previous years I am inserting tables setting out the figures in connection with this kind of work for the past ten years.

I am pleased to be able to report that during the year no vacancies have occurred in the staff of inspectors; that the Department owes much, for that amount of efficiency it may possess, to the zealous and tactful way in which the Chief Inspector performs his duties, is too well known to your Council to need stating by me.

I am appending to this report a list of the Magisterial proceedings which have been necessary during the year, an extended schedule of the ages at and causes of death, a return of the samples taken under the Food and Drugs Acts, the official limitation of the boundaries of the wards, a Report on the Conference of the Royal Sanitary Institute on School Hygiene, and a map showing the distribution of those cases of Scarlet Fever, Typhoid Fever, Diphtheria, and Small Pox which have been notified during the year.

I am, Mr. Mayor and Gentlemen,
Your obedient servant,
E. H. SNELL,
Medical Officer of Health.

Public Health Department,
Coventry, March 25th, 1905.

MAGISTERIAL PROCEEDINGS, 1904.

No. of Cases.	Complaint.	Result.	Total Costs.		
			£	s.	d.
1	Slaughtering on unlicensed premises ...	Fined £2 and costs ...	2	8	6
2	,, ,, ,, ...	,, 50/- ,, ..	2	18	6
3	,, ,, ,, ...	,, £3 ,, ...	3	10	6
4	Non-compliance with notice	Order made to abate ...		8	0
5	,, ,, ,, ...	,, ,, ...		8	6
6	,, ,, ,, ...	,, ,, ...		8	0
7	,, ,, ,, ...	Order made for payment...		10	6
8	One house unfit for habitation	Closing Order made ...		9	0
9	Two houses ,, ,, ...	,, ,, ...	1	16	0
10	Two ,, ,, ,, ...	,, ,, ...		14	0
11	Selling adulterated Milk	Fined 10/- and costs ...	1	9	0
12	,, ,, ,, ...	Ordered to pay costs ...		15	6
13	,, ,, ,, ...	Fined 2/6 and costs ...	1	3	6
14	,, ,, ,, ...	,, 5/- ,, ...	1	4	0
15	Selling unlabelled Margarine	,, 10/- ,, ..	1	9	0
16	,, ,, ,, ...	,, ,, ,, ...	1	9	0
17	,, ,, ,, ...	Ordered to pay costs ...		19	0
18	,, improperly labelled Margarine...	Fined 10/- and costs ...		18	6
19	,, ,, ,, ,, ...	,, ,, ,, ...		18	6
20	Contravention of Cowsheds, Dairies and Milkshops Order	Dismissed...			
21	,, ,, ,, ...	Withdrawn on payment of costs		6	0
22	,, ,, ,, ...	Dismissed...			
23	,, ,, ,, ...	Fined £2 and costs ...	2	9	6
24	Exposing unsound meat for sale ...	,, £5 ,, ...	6	14	6
25	Not notifying unsound meat	,, £3 ,, ...	3	9	6
26	Not registering Common Lodging House	Withdrawn on payment of costs		4	0
27	Breach of Bye-laws: Houses Let in Lodgings	,, ...		4	0
28	,, ,, ,, ...	,, ...		4	0
		£	37	9	0

EXTENDED SCHEDULE OF AGES AND CAUSES OF DEATH, YEAR 1904.

No.	Diseases.	Ages.													All Ages.
		0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	85-	
1	Small-pox—														
	(*a*) Vaccinated	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(*b*) Unvaccinated	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	(*c*) No Statement	..	..	..	..	..	..	1	..	..	..	..	..	..	1
2	Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3	Scarlet Fever	..	6	4	..	..	..	..	..	..	..	..	..	..	10
4	Typhus Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5	Epidemic Influenza	3	..	1	..	..	..	3	1	..	1	2	3	1	15
6	Whooping Cough	28	20	..	..	..	..	..	..	..	..	..	..	..	48
7	Diphtheria	1	6	3	..	1	..	..	..	..	..	..	..	..	11
8	Enteric Fever	..	..	1	..	..	..	..	..	..	..	..	..	..	1
9	Asiatic Cholera	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10	Diarrhœa, Dysentery	12	1	..	..	..	..	..	1	..	..	..	..	..	14
11	Epidemic Enteritis	28	6	..	..	..	..	..	..	..	..	..	1	..	35
12	*Other Allied Diseases*	..	.	..	..	..	..	.	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
13	Hydrophobia	..	..	..	..	..	..	..	..	..	..	..	..	..	..
14	Glanders	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15	Tetanus	..	..	..	..	..	..	..	..	..	1	..	..	..	1
16	Anthrax	..	..	..	..	..	..	..	..	..	..	..	..	..	..
17	Cowpox	..	..	..	..	..	..	..	..	..	..	..	..	..	..
18	Syphilis	2	2	..	..	..	..	..	..	..	2	..	..	..	6
19	Gonorrhœa	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20	Phagedæna	..	..	..	..	..	..	..	..	..	..	..	..	..	..
21	Erysipelas	1	..	..	..	..	..	1	1	..	..	..	2	..	5
22	Puerperal Fever	..	..	..	..	..	..	4	1	..	..	..	..	..	5
23	Pyæmia	..	..	..	..	..	..	..	1	..	1	..	..	..	2
24	Infective Endocarditis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25	*Other Allied Diseases*	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25*a*	Cerebro-spinal Meningitis	2	..	..	..	..	..	..	..	1	..	1	..	..	4
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
26	Malarial Fever	..	..		..	..	..	..	..	..	..	..	..	..	..
27	Rheumatic Fever	..	..	..	..	..	..	1	..	..	..	..	1	..	2
28	Rheumatism of Heart	..	..	..	..	..	..	..	..	..	..	..	..	..	..
29	Tuberculosis of Brain	9	3	3	..	..	..	1	..	..	..	..	..	..	16
30	Tuberculosis of Larynx	..	..	..	..	..	..	..	..	..	..	..	..	..	..
31	Phthisis	..	2	2	4	3	3	18	17	17	7	5	..	..	78
32	Abdominal Tuberculosis	6	1	..	..	..	..	..	..	..	..	..	..	..	7
33	General Tuberculosis	..	1	..	..	1	..	3	..	..	..	1	..	..	6
34	Other forms Tuberculosis	..	..	..	..	..	..	..	1	..	..	..	..	..	1
35	*Other Infective Diseases*	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
36	Thrush	..	..	..	..	..	..	..	..	..	..	..	..	..	..
37	Actinomycosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
38	Hydatid Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
39	Scurvy	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40	*Other Diseases due to Altered Food*	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
	TOTALS	92	48	14	4	5	3	32	23	18	12	9	7	1	268

No.	Diseases.	Ages.													All Ages
		0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	85-	
41	Acute Alcohism	..	..	..	..	..	..	..	..	1	..	..	..	..	1
42	Chronic Alcoholism	..	..	..	..	..	..	..	2	..	..	..	..	..	2
43	*Chronic Industrial Poisonings* ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
44	*Other Chronic Poisonings*	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
45	Osteo-arthritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
46	Gout	..	..	..	..	..	..	..	..	..	..	1	..	..	1
47	Cancer	..	1	..	..	1	..	1	4	12	16	18	7	3	63
48	Diabetes Mellitus	..	..	..	..	..	2	1	1	1	..	2	1	..	8
49	Purpura Hæmorrhagica	1	..	..	..	..	..	..	..	..	..	..	..	..	1
50	Hæmophilia	..	..	1	..	..	..	..	..	..	..	..	..	..	1
51	Anæmia	..	..	..	..	1	..	..	..	1	..	..	..	..	2
52	Lymphadenoma	..	..	..	..	..	..	..	..	..	..	..	..	..	..
53	Premature Birth	64	..	..	..	..	..	..	..	..	..	..	..	..	64
54	Injury at Birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55	Debility at Birth	10	..	..	..	..	..	..	..	..	..	..	..	..	10
56	Atelectasis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
57	*Congenital Defects*	7	1	..	..	..	..	..	..	..	..	1	..	..	9
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
58	Want of Breast Milk	..	..	..	..	..	..	..	..	..	..	..	..	..	..
59	Atrophy, Debility, Marasmus ..	28	2	..	..	..	..	..	..	..	1	..	..	..	31
60	Dentition	7	1	..	..	..	..	..	..	-	..	..	..	..	8
61	Rickets	2	2	..	..	..	..	..	..	..	..	..	..	..	4
62	Old Age, Senile Decay	..	..	..	..	..	..	..	..	..	1	16	40	14	71
63	Convulsions	10	4	..	..	..	..	..	..	..	..	..	..	..	14
64	Meningitis	5	8	1	2	..	..	..	1	1	..	..	..	..	18
65	Encephalitis	..	..	..	1	..	..	..	..	..	..	..	..	..	1
66	Apoplexy	..	..	..	..	..	..	1	1	9	6	21	16	1	55
67	Softening of Brain	..	..	..	..	..	..	..	..	..	1	2	..	..	3
68	Hemiplegia	..	..	..	..	..	..	1	..	..	2	4	..	..	7
69	General Paralysis of Insane ..	..	..	..	..	..	..	..	..	4	..	..	..	..	4
70	Other forms of Insanity	..	..	..	..	..	..	..	..	..	..	..	..	..	..
71	Chorea	..	..	..	..	..	..	..	..	..	..	..	..	..	..
72	Cerebral Tumour	..	..	..	..	..	..	..	..	..	..	..	..	..	..
73	Epilepsy	..	..	..	..	1	1	..	..	..	3	1	..	..	6
74	Laryngismus Stridulus .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..
75	Locomotor Ataxy	..	..	..	..	..	..	..	..	1	..	..	..	..	1
76	Paraplegia	..	..	..	..	..	..	..	1	1	2	1	2	..	7
77	*Other forms, Brain Diseases* ..	..	..	..	..	..	..	2	..	..	3	2	1	..	8
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
78	Otitis	..	2	..	..	..	..	..	..	..	..	..	..	..	2
79	Disease of Nose, Epistaxis ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
80	Diseases of Eye	..	..	..	..	..	..	..	..	..	..	..	..	..	..
81	Pericarditis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
82	Endocarditis	..	1	..	..	1	2	1	8	7	12	6	4	..	42
83	Hypertrophy of Heart	..	..	..	..	..	..	..	..	..	..	..	..	..	..
84	Angina Pectoris	..	..	..	..	..	..	..	..	..	..	..	..	..	..
85	Aneurism	..	..	..	..	..	..	..	1	2	..	1	..	..	4
86	Senile Gangrene	..	..	..	..	..	..	..	..	..	..	..	1	..	1
87	Embolism, Thrombosis	..	..	..	..	..	1	..	1	..	..	..	..	..	2
88	Phlebitis	..	..	..	..	..	..	..	1	..	..	..	..	..	1
89	Varicose Veins	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	TOTALS ..	134	22	2	3	4	6	7	21	40	47	76	72	18	45

o.	Diseases.	Ages.													All Ages.
		0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	85-	
90	*Other Diseases, Heart and Vessels*	3	..	..	1	..	1	3	9	7	16	15	14	2	71
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
91	Laryngitis	..	1	2	..	..	..	..	..	..	..	..	..	..	3
92	Croup	..	2	..	..	..	..	..	..	..	..	..	..	..	2
93	*Other Diseases, Larynx & Trachea*	..	..		..	..	..	..	..	..	..	..	..	..	..
		..	..	..	.	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	.	.	..	..	..	..
94	Acute Bronchitis	32	9	..	..	..	..	..	1	..	5	3	5	1	56
95	Chronic Bronchitis	..	..	..	..	..	..	..	..	1	6	15	6	1	29
96	Lobar Pneumonia	..	..	..	..	..	..	..	3	2	..	..	..	..	5
97	Lobular Pneumonia	20	16	..	..	..	..	..	1	1	5	4	..	..	47
98	Pneumonia	6	4	1	..	2	..	1	4	5	2	3	7	..	35
99	Emphysema, Asthma	..	..	..	..		..	..	1	1	..	..	1	..	3
100	Pleurisy	..	..	..	..	..	..	1	2	1	1	..	..	..	5
101	*Other Diseases, Respiratory System*	..	..	..	..	..	2	..	..	1	1	..	1	..	5
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
102	*Diseases of Mouth and Annexa*	..	..	..	..	..	..	..	1	..	..	..	..	..	1
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
103	Diseases of Pharynx	..	..	..	..	..	..	..	..	..	..	..	..	..	..
104	Diseases of Œsophagus	..	..	..	..	..	..	..	..	..	..	..	..	..	..
105	Ulcer of Stomach and Duodenum	..	..	..	..	2	..	..	1	..	..	..	..	..	3
106	Other Diseases of Stomach	1	..	..	..	..	..	1	..	..	..	1	1	..	4
107	Enteritis	7	1	..	..	..	..	1	..	..	1	..	..	..	10
108	Appendicitis	..	..	..	2	..	1	..	..	1	1	..	..	..	5
109	Obstruction of Intestine	..	..	..	..	..	..	..	..	1	2	2	2	..	7
110	Other Diseases of Intestine	2	1	..	..	..	..	..	..	1	..	..	..	..	4
111	Cirrhosis of Liver	..	..	..	..	1	..	1	1	4	4	1	..	1	13
112	Other Diseases of Liver	1	..	..	..	..	..	..	..	..	..	..	..	..	1
113	Peritonitis	..	..	..	1	..	..	..	..	..	..	..	..	..	1
114	*Other Diseases, Digestive System*	..	..	..	..	..	..	..	1	..	..	..	1	..	2
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
115	*Diseases, Lymphatic System and Glands*	..	..	..	..	1	..	..	..	..	..	..	..	..	1
		..	..	..	..	..	..		..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
116	Acute Nephritis	..	..	..	..	..	..	1	..	1	1	..	..	..	3
117	Bright's Disease	..	1	..	..	..	..	1	7	6	2	3	1	..	21
118	Calculus	..	..	..	..	..	..	..	1	..	..	1	1	..	3
119	Diseases of Bladder and Prostate	..	..	..	..	..	..	..	..	..	1	3	3	..	7
120	*Other Diseases, Urinary System*	..	..	..	..	..	..	..	1	..	..	1	..	..	2
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
121	Diseases of Testis and Penis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
122	Diseases of Ovaries	..	..	..	..	..	..	..	..	..	..	..	1	..	1
123	Diseases of Uterus and Appendages	..	..	..	..	..	..	1	..	2	..	..	..	..	3
124	Diseases of Vagina and External Genitals	..	..	..	..	..	..	..	..	..	..	..	..	..	..
125	Diseases of Breast	..	..	..	..	..	..	..	..	..	..	..	..	..	..
126	Abortion, Miscarriage	..	..	..	..	..	..	1	1	..	..	..	..	..	2
127	Puerperal Mania	..	..	..	..	..	..	..	..	..	..	..	..	..	..
128	Puerperal Convulsions	..	..	..	..	1	..	1	..	..	..	..	..	..	2
129	Placenta Prævia, Flooding	..	..	..	..	.	..	..	1	..	..	..	..	..	1
	TOTALS	72	35	3	4	7	4	13	36	35	48	52	44	5	358

No.	Diseases.	Ages.													A. Ag
		0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	85-	
130	Puerperal Thrombosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
131	*Other Diseases, Pregnancy and Childbirth*	..	..	..	..	..	1	..	..	..	..	..	..	..	[illegible]
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
132	Arthritis, Ostitis, Periostitis ..	..	1	..	..	..	..	..	..	..	..	..	..	..	[illegible]
133	*Other Diseases, Osseous System* ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
		..	..	..	..	..	..	..	..	..	..	..	..	..	..
134	Ulcer, Bedsore	..	..	..	..	..	..	..	..	..	..	..	1	..	[illegible]
135	Eczema	1	..	..	..	..	..	..	..	.	..	..	..	..	[illegible]
136	Pemphigus	..	..	..	..	..	..	..	..	..	..	..	..	..	..
137	*Other Diseases, Integumentary System*	..	..	..	.	..	..	..	..	..	..	1	..	..	[illegible]
		..	..	..	..	..	..	..	..	..	..	..	..	..	.
		..	..	..	..	..	..	..	..	..	..	..	..	..	.
	Accidents and Negligence—														
138	In Mines and Quarries	..	..	..	..	..	..	..	..	..	..	..	..	..	.
139	In Vehicular Traffic	..	..	..	..	1	..	1	..	1	1	..	..	..	[illegible]
140	On Railways	..	..	..	..	..	..	1	..	..	..	..	..	..	[illegible]
141	On Ships, Boats, &c. (not drowning)	..	1	..	..	..	..	2	..	..	2	1	2	..	[illegible]
142	In Building Operations	..	..	..	..	..	..	1	..	..	..	..	..	..	[illegible]
143	By Machinery	..	..	..	..	..	..	..	..	..	..	..	..	..	.
144	By Weapons and Implements ..	1	..	..	..	..	..	..	1	..	..	..	..	..	[illegible]
145	Burns and Scalds	..	2	1	..	..	..	..	..	..	..	1	1	..	[illegible]
146	Poisons, Poisonous Vapours ..	..	1	..	..	..	..	..	..	..	1	..	..	..	[illegible]
147	Surgical Narcosis	..	..	..	..	..	..	..	..	..	..	..	..	..	.
148	Effects of Electric Shock	..	..	..	..	..	..	..	..	..	..	..	..	..	.
149	Corrosions by Chemicals	..	..	..	..	..	..	..	..	..	..	..	..	..	.
150	Drowning	..	..	1	..	..	..	..	..	1	..	..	1	..	[illegible]
151	Suffocation, Overlaid in Bed ..	4	..	..	..	..	..	..	..	..	..	..	..	..	[illegible]
152	,, Otherwise	3	..	..	..	..	..	..	..	..	..	1	..	..	[illegible]
152*a*	Improper Feeding	2	..	..	..	..	..	..	..	..	..	..	..	..	[illegible]
153	Falls not specified	..	..	..	..	..	..	..	2	..	..	1	..	..	[illegible]
154	Weather Agencies	..	..	..	..	..	..	..	..	..	1	..	..	..	[illegible]
155	Otherwise not stated	..	..	..	1	1	..	1	..	..	..	1	..	..	[illegible]
156	Homicide	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Suicides—														
157	By Poison	..	..	..	..	..	..	..	1	..	..	..	..	..	[illegible]
158	By Asphyxia	..	..	..	..	..	..	..	..	..	..	..	..	..	..
159	By Hanging and Strangulation ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
160	By Drowning	..	..	..	..	..	..	..	..	..	..	..	..	..	..
161	By Shooting	..	..	..	..	..	..	..	..	..	..	..	..	..	..
162	By Cut or Stab	..	..	..	..	..	..	..	..	..	1	..	..	..	[illegible]
163	By Precipitation from Elevated Places	..	..	.	..	..	..	..	..	..	..	..	..	..	..
164	By Crushing	..	..	..	..	..	..	..	..	..	..	..	..	..	..
165	By other and unspecified methods	..	..	..	..	..	..	..	..	..	..	..	..	..	..
166	Execution	..	..	..	..	..	..	..	..	..	..	..	..	..	..
167	Sudden Death, cause not ascertained	..	..	..	..	..	..	..	..	..	..	..	..	..	..
168	Ill defined and unspecified causes	..	1	..	..	1	..	1	..	..	1	..	..	..	4
169	Not certified	10	..	..	..	..	..	..	..	..	..	..	4	..	14
	Totals, Sheet No. 4 ..	21	6	2	1	3	1	7	4	2	7	6	9	..	69
	Totals, Sheet No. 3 ..	72	35	3	4	7	4	13	36	35	48	52	44	5	35
	Totals, Sheet No. 2 ..	134	22	2	3	4	6	7	21	40	47	76	72	18	452
	Totals, Sheet No. 1 ..	92	48	14	4	5	3	32	23	18	12	9	7	1	26
	Grand Totals ..	319	111	21	12	19	14	59	84	95	114	143	132	24	1147

Sale of Food and Drugs Act, 1875.

Copies of the Report of the Public Analyst for the City of Coventry upon the articles analysed by him under the above Act for the year ending 31st December, 1904.

QUARTER ENDING MARCH 31st, 1904.

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
Butter	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Genuine	
Margarine ...		,,	
Lard		,,	
Butter		,,	
Butter		,,	
Compound Tincture of Rhubarb	,,	,,	
Ipecacuanha Wine	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	Adulterated, deficient of 7% of fat	Withdrawn on payment of Costs and Analyst's Fee
New Milk ...	,,	Genuine	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	Adulterated with 19°/o added water	Fined 10s. and Costs and Analyst's Fee
New Milk ..	,,	Genuine	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	

Sale of Food and Drugs Act, 1875—Continued.

QUARTER ENDING MARCH 31st, 1904—*continued.*

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
New Milk ...	W. H. Clarke. Food & Drugs Inspector to the City of Coventry.	Genuine	
Butter		,,	
Butter ...		,,	
New Milk ...		,,	
New Milk ...		,,	
New Milk ...	,,	,,	

QUARTER ENDING JUNE 30th, 1904.

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
Brandy	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Adulterated with 19% added water	Preliminary sample
Brandy... ...		Genuine	
Brandy... ...		,,	
Brandy... ...		Adulterated with 4°/o added water	Preliminary sample
Whiskey ...	,,	Genuine	
Whiskey ...	,,	Adulterated with 8% added water	Preliminary sample
Brandy... ...	,,	Genuine	
Brandy... ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	Adulterated, deficient of 7% of fat	Caution
New Milk ...	,,	Adulterated with 8°/o added water	Fined 2/6 and Costs and Analyst's Fee
Butter	,,	Genuine	
Condensed Milk	,,	,,	
Condensed Milk	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	

Sale of Food and Drugs Act, 1875—Continued.

QUARTER ENDING JUNE 30th, 1904—*continued.*

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
New Milk ..	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Genuine	
Sweets		,,	
Compound Liquorice P'd'r		,,	
Butter		,,	
Butter	,,	Adulterated with 95% foreign fat	Preliminary sample
New Milk ...	,,	Genuine	
New Milk ..	,,	,,	
New Milk .	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	Deficient of 29% of its fat	Fined 5s and Costs and Analyst's Fee
Margarine ..	,,	Genuine	
Butter	,,	,,	
Butter	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
Coffee	,,	,,	
Strawberry Jam	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
Margarine ...	,,	,,	*Unlabelled :* Fined 10s. and Costs and Analyst's Fee *Improper Wrapper :* Fined 10s. and Costs
Margarine ...	,,	,,	*Unlabelled :* Dismissed on payment of Costs and Analyst's Fee
Margarine ...	,,	,,	*Unlabelled :* Fined 10s. and Costs and Analyst's Fee *Improper Wrapper :* Fined 10s. and Costs
New Milk ...	,,	,,	

Sale of Food and Drugs Act, 1875—Continued

QUARTER ENDING JUNE 30th, 1904—*continued.*

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
Butter	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Genuine	
Butter		,,	
Olive Oil ...		,,	
Castor Oil ...		,,	
Butter		,,	
Cod Liver Oil...	,,	,,	
Olive Oil ...	,,	,,	
Cod Liver Oil ...	,,	,,	
Olive Oil ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	

QUARTER ENDING SEPTEMBER 30th, 1904.

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
White Pepper ..	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Genuine	Poor Quality
New Milk ...		,,	,,
New Milk ...		,,	,,
New Milk ...		,,	,,
New Milk ...		,,	
New Milk ...	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	Poor Quality
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Butter	,,	,,	

Sale of Food and Drugs Act, 1875—Continued

QUARTER ENDING SEPTEMBER 30th, 1904—*continued.*

Article submitted for Analysis.	State whether the Sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated what were the nature and extent of the Adulterations.	Observations.
Butter	W. H. Clarke. Food & Drugs Inspector to the City of Coventry.	Genuine	
Pepper		"	
Compound Liquorice P'd'r		"	
New Milk		"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
Butter	"	"	
Pepper	"	"	
Bread	"	"	
Sweets	"	"	
Butter	"	"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
Butter	"	"	

QUARTER ENDING DECEMBER 31st, 1904.

Malt Vinegar	W. H. Clarke, Food & Drugs Inspector to the City of Coventry.	Genuine	
Malt Vinegar		"	
New Milk		"	
New Milk		"	
New Milk		"	
New Milk	"	"	
New Milk	"	"	
New Milk	"	"	
Bread	"	"	
Compound Tincture of Rhubarb	"	"	
Camphorated Oil	"	"	
Coffee	"	"	
Butter	"	"	
Margarine	"	"	

Sale of Food and Drugs Act, 1875—Continued.

QUARTER ENDING DECEMBER 31st, 1904—*continued.*

Article submitted for Analysis.	State whether the sample was submitted to the Analyst by an Officer acting under direction of a Local Authority under Section 13 of Act, and if so the name of such Authority.	Result of Analysis showing whether the Sample was Genuine or Adulterated, and if Adulterated, what were the nature and extent of the Adulterations.	Observations.
Margarine ...	W. H. Clarke Food & Drugs Inspector to the City of Coventry.	Genuine	
New Milk ...		,,	
New Milk ..		,,	
New Milk ...		,,	
New Milk .		,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Spirit of Sal Volatile	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ..	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ...	,,	,,	
New Milk ..	,,	,,	
New Milk ..	,,	,,	
Butter	,,	,,	
Butter	,,	,,	
Camphorated Oil	,,	,,	
Whiskey ..	,,	,,	
Brandy	,,	,,	
Butter	,,	,,	
Pepper	,,	,,	
Mustard ...	,,	,,	
Lard	,,	,,	
Pepper	,,	,,	
Lard	,,	,,	
Condensed Milk	,,	,,	
Butter	,,	,,	
Cream of Tartar	,,	,,	
Crushed Linseed	,,	,,	
Cocoa	,,	,,	
Sweet Spirit of Nitre	,,	Adulterated : Slight deficiency of Ethyl Nitrite	Caution.
Sweet Spirit of Nitre	,,	Genuine	
Butter	,,	,,	
Butter	,,	,,	
Sweet Spirit of Nitre	,,	,,	
Tinct're of Iodine	,,	,,	
Butter	,,	,,	

Boundaries of the New Wards, 1904.

GREY FRIARS' WARD.

Commencing at a point in the centre of Smithford Street at the intersection of Hertford Street, thence westward along the centre of Smithford Street, Fleet Street, and Spon Street to the intersection of Crow Lane, thence southward along the centre of Crow Lane to the intersection of Trafalgar Street, thence westward along the centre of Trafalgar Street to the intersection of Hope Street, thence south-westward along the centre of Hope Street to the intersection of the Butts, thence south-eastward along the centre of the Butts to the intersection of Albany Road, thence south-westward along the centre of Albany Road to the Birmingham Line of the L. and N.W. Railway Company, thence eastward along the centre of the said railway line to the centre of the Warwick Road Bridge, thence northward along the centre of the Warwick Road and Hertford Street to the point of commencement aforesaid.

HEARSALL WARD.

Commencing at a point in the centre of Spon Street at the intersection of Crow Lane, thence westward along the centre of Spon Street, Spon End, and the Allesley Old Road to the City Boundary, thence following the line of the said City Boundary southward and eastward to a point in the centre of the L. and N.W. Railway Line at the Coventry Railway Station, thence westward along the centre of the said railway line through Coventry Railway Station to the boundary of the Grey Friars' Ward in the centre of the Warwick Road Bridge, and thence westward and north-eastward along the southern and western boundaries of the Grey Friars' Ward as hereinbefore defined to the point of commencement aforesaid.

BABLAKE WARD.

Commencing at a point in the centre of Smithford Street at the intersection of Hertford Street, thence northward along the centre of Broadgate, Cross Cheaping, and the Burges to the intersection of Well Street, thence westward along the centre of Well Street to the intersection of Upper Well Street, thence northward, westward, and south-westward along the centre of Upper Well Street, Hill Cross, Abbott's Lane, and Barras Lane to the intersection of the Holyhead Road, thence north-westward along the Holyhead Road to the City Boundary, thence following the line of the said City Boundary south-westward to the boundary of the Hearsall Ward, thence eastward along the northern boundaries of the Hearsall and the Grey Friars' Wards as hereinbefore defined to the point of commencement aforesaid.

RADFORD WARD.

Commencing at a point in the centre of Bishop Street at the intersection of Well Street, thence northward along the centre of Bishop Street to the intersection of Leicester Row, thence north-eastward along the centre of Leicester Row and Foleshill Road to the intersection of Lockhurst Lane, thence northward along the centre of Lockhurst Lane to the intersection of Spring Road, thence westward along the centre of Spring Road to the City Boundary, thence following the line of the said City Boundary southward and westward to the boundary of Bablake Ward, thence south-eastward and eastward along the northern boundary of the Bablake Ward as hereinbefore defined to the point of commencement aforesaid.

HARNALL WARD.

Commencing at a point in the centre of Bishop Street at the intersection of Silver Street, thence north-eastward along the centre of Silver Street, Cook Street, and Stoney Stanton Road to Priestley's

Bridge, and thence westward along the centre of the Coventry Canal to the Prince William Henry Bridge, thence southward along the eastern boundary of the Radford Ward to the point of commencement aforesaid.

FOLESHILL WARD.

Commencing at a point in the centre of the Stoney Stanton Road at the intersection of Priestley's Bridge, thence northward along the centre of the Stoney Stanton Road to a point opposite the point where the Parliamentary boundary of the City of Coventry turns eastward off the said road, thence to and along that boundary eastward, southward, and eastward to the centre of the Coventry Canal, thence northward along the centre of the said Canal to the City Boundary, and following the line of the said Boundary northward, westward, and southward to the boundary of the Radford Ward at Spring Road, thence southward and south-westward along the eastern boundary of the Radford Ward as hereinbefore defined to its intersection with the northern boundary of the Harnall Ward, thence eastward along the northern boundary of the Harnall Ward as hereinbefore defined to the point of commencement aforesaid.

SWANSWELL WARD.

Commencing at a point in the centre of the Stoney Stanton Road at the intersection of Norton Street, thence eastward along the centre of Norton Street to the intersection of Jesson Street, thence southward along the centre of Jesson Street to the intersection of White Street, Primrosehill Street, and Castle Street to the intersection of Adelaide Street, thence northward along the centre of Adelaide Street to the intersection of Harnall Lane East, thence eastward along the centre of Harnall Lane East to the intersection of Swan Lane, thence northward along the centre of Swan Lane to the intersection of the road leading over Red Lane Bridge, thence westward along the centre of that road to the centre of the said Bridge, thence northward along the centre of the Coventry Canal to the boundary of the Foleshill Ward, thence westward, northward, westward, and south-westward along the boundaries of the Harnall and Foleshill Wards as hereinbefore defined to the point of commencement aforesaid.

HILL FIELDS WARD.

Commencing at a point in the centre of White Street at the intersection of Jesson Street, thence south-westward along the centre of White Street to the intersection of Ford Street, thence eastward along the centre of Ford Street and Raglan Street to the intersection of Canterbury Street, thence northward along the centre of Canterbury Street to the intersection of Yardley Street, thence eastward along the centre of Yardley Street and Vernon Street to the intersection of Berry Street, thence south-eastward along the centre of Berry Street to Catharine Street, thence eastward along the centre of Catharine Street to Nicholls Street, thence northward along the centre of Nicholls Street and continuation thereof to the boundary of the Swanswell Ward at the intersection of Swan Lane and Harnall Lane East, thence westward and south-westward along the boundary of the Swanswell Ward as herein before defined to the point of commencement aforesaid.

ALL SAINTS' WARD.

Commencing at a point in the centre of Lower Ford Street at the intersection of that street with the boundary of Hill Fields Ward, thence south-eastward along the centre of Lower Ford Street to its intersection with Far Gosford Street, thence north-eastward along the centre of Far Gosford Street to its intersection with Paynes Lane, thence northward along the centre of Paynes Lane to its intersection with the boundary of Hill Fields Ward, and thence northward, westward, southward, and westward along the boundary of the Hill Fields Ward as hereinbefore defined to the point of commencement aforesaid.

ST. MARY'S WARD.

Commencing at a point in the centre of Smithford Street at the intersection of Hertford Street, thence eastward along the centre of Smithford Street, High Street, Earl Street, Jordan Well, Gosford Street, and Far Gosford Street to the intersection of Lower Ford Street, thence north-westward along the boundary of All Saints' Ward as hereinbefore defined to the boundary of Hill Fields Ward, thence westward along the boundary of the Hill Fields Ward as hereinbefore defined to the boundary of the Swanswell Ward, thence northward along the boundary of the Swanswell Ward as hereinbefore defined to the boundary of the Harnall Ward, thence south-westward along the boundary of the Harnall Ward as hereinbefore defined to the boundary of the Radford Ward, and thence southward along the boundary of the Radford and Bablake Wards as hereinbefore defined to a point of commencement aforesaid.

CHEYLESMORE WARD.

Commencing at a point in the centre of the River Sherbourne at Gosford Bridge, thence south-eastward along the centre of the said River to the Brickkiln Lane Bridge, thence south-westward along the centre of Brickkiln Lane to the intersection of the London Road, thence south-eastward along the centre of the London Road to the City Boundary, thence following the line of the said Boundary westward to the boundary of the Hearsall Ward, thence westward along the said last-mentioned boundary to the boundary of the Grey Friars' Ward, thence northward along the boundary of the Grey Friars' Ward to the commencement of the boundary of St. Mary's Ward, thence eastward along the last-mentioned boundary to the point of commencement aforesaid.

STOKE WARD.

Commencing at a point in the centre of the London Road on the Boundary of the City, thence eastward and northward along the said boundary to the boundary of the Foleshill Ward, thence southward along the boundary of the Foleshill Ward as hereinbefore defined to the boundary of the Swanswell Ward, thence southward along the boundaries of the Swanswell and Hill Fields Wards as hereinbefore defined to the boundary of All Saints' Ward, thence southward and westward along the boundaries of All Saints' and St. Mary's Wards as hereinbefore defined to the boundary of the Cheylesmore Ward, and thence south-eastward along the last-mentioned boundary as hereinbefore defined to the point of commencement aforesaid.

1904.

Comparison of Prevalence of Sickness and Death from Infectious Diseases.

Year.	Small Pox.		Erysipelas.		Diphtheria.		Membranous Croup.		Scarlet Fever.		Enteric Fever.		Puerperal Fever.		Measles.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1890	0	0	56	3	5	5	10	1	67	2	30	4	2	2	...	1
1891	0	0	34	5	8	1	6	3	42	0	34	7	4	4	1341	36
1892	1	0	59	3	1	0	18	2	38	0	53	9	2	4	332	4
1893	30	0	145	7	6	1	4	1	30	0	40	9	9	7	39	0
1894	22	1	109	2	14	3	7	2	385	13	14	6	5	2	2353	54
1895	0	0	84	3	6	3	6	3	439	19	49	5	9	3	116	3
1896	3	0	74	2	16	3	1	3	313	9	59	12	12	9	1205	35
1897	0	0	72	4	14	4	11	6	221	6	25	3	2	1	...	16
1898	0	0	53	0	20	5	13	10	278	10	53	6	10	8	...	29
1899	0	0	60	2	38	5	15	11	188	3	126	18	7	3	...	13
1900	0	0	71	1	42	12	24	10	637	17	48	6	14	7	...	50
1901	2	0	92	3	122	26	17	5	781	18	141	15	22	10	...	3
1902	4	0	66	3	129	28	7	3	245	10	60	6	11	4	...	0
1903	71	3	43	1	113	27	14	7	121	5	15	2	5	0	...	57
1904	5	1	67	5	74	10	4	1	222	10	24	1	9	5	...	0

REPORT ON THE CONFERENCE ON SCHOOL HYGIENE HELD BY THE ROYAL SANITARY INSTITUTE AT THE LONDON UNIVERSITY, FEBRUARY 7TH-10TH, 1905.

This Conference was held by the Institute as a prelude to the International Congress on School Hygiene, which is to be held in London in 1907.

The Conference was opened by Sir Arthur Rücker, the Principal of the University of London, on the evening of February 7th.

The three following days were devoted entirely to papers and discussions. These were grouped under the following heads:—

1. Physical and mental development during School life.
2. Physical inspection.
3. Building and equipment.
4. Sanitary inspection.
5. Training of teachers.
6. Training of scholars.

I.—PHYSICAL AND MENTAL DEVELOPMENT DURING SCHOOL LIFE.

Dr. Clement Dukes, of Rugby, read a paper on " Sleep in relation to Education," in which it was contended that both in primary and secondary schools children were so worked as to be deprived of the brain rest or sleep which was necessary for their healthy development. In primary schools children of three years of age passed the same number of hours in school as those of 14 years of age—five hours each day for five days in the week, with a " break " of a few moments in the morning. He was convinced that no teacher would be guilty of such a wrong to his own child of three years of age. In secondary schools the boy of 14 had allotted to him the same hours of work as the youth of 19. Many even of the younger boys worked frequently 11 hours a day, not including punishments. It was not realized that this undigested work with which the brain was stuffed was of as little value to the brain itself in facilitating its expansion as undigested food was to the body. In the process of education children should be worked by scale according to age. The unfortunate brain was pursued even into the vacations, and its daily toll exacted. The same rule as to work was applied to sleep, the younger pupils being allotted the same number of hours as the seniors. This meant to children lowered vitality, apathy, bloodlessness, diminished growth of body and brain. He concluded by moving a resolution which, as it originally stood on the agenda, declared it to be desirable that in all schools boys under the age of 15 should be allowed at least nine and a half hours of unbroken rest in winter, and not less than nine hours in summer. This, however, was modified so as to express in general terms the opinion of the Conference that ample hours of sleep according to age were essential to the well-being of growing children.

Several other papers were read; and in the discussion which followed stress was laid on the fact that what was wanted was not so much the teaching of Hygiene to Scholars as that they should be taught in an atmosphere of Hygiene; that the whole time they spent at school should be under the most hygienic circumstances possible, and that this would be the most successful and practical way of teaching them how they should conduct their own homes when they grew up.

II.—PHYSICAL INSPECTION.

Papers were read in which Dr. Chalmers (Glasgow) advocated systematic inspection of schools to ascertain the distribution of underfed children, and a system of their organized feeding.

Dr. Newsholme (Brighton) condemned the abolition of the epidemic grant by the Board of Education; and

Mrs. Marvin and Miss Ellen Wilson discussed the needs for medical inspection in co-operation with teachers and parents.

Resolutions were passed in favour of the appointment of specialists of both sexes in school hygiene as school inspectors; of entrusting the inspection of domestic subjects to women; of appointing women inspectors for infants' and girls' schools, pupil teachers' centres, and training colleges; and of regular and systematic medical inspection of children in schools of all grades. It was also resolved by a majority that in view of the dangers from infectious diseases no child should be permitted to attend school under the age of six.

III.—SCHOOLS: THEIR BUILDING AND EQUIPMENT.

Sir William Anson, Parliamentary Secretary to the Board of Education, occupied the chair; in opening the discussion he said he was glad to show by his presence not only his personal interest in the conference, but the importance attached by the Board of Education to the subject of School Hygiene. It had been much before them in the course of the past year, and he knew that Lord Londonderry attached great value to it as a Branch of the Board's work. School Hygiene had many aspects, one of which was brought prominently before the Board by a deputation of very distinguished gentlemen of the medical profession last summer. It concerned not merely the building and the apparatus of the school, but the effect of the studies and the life of the scholars on their health. It affected the actual physical condition in which they came to school, and it raised the question how far the laws of health in one form or another could be profitably taught in our schools. This had been much impressed on the Board of Education in the last few months. In this, as in other matters, educational and other, they could not always do all at once what they would like to see done. As regarded the teaching of hygiene, they had to consider what in the present state of instruction in the subject teachers could be expected to teach, and what children could be expected to learn; and one had to bear in mind that in instructing children on this subject ideas and language must alike be of the simplest possible description in order that the teaching might be thorough, and might not be as misleading as sometimes their instruction in the past had been, owing to the fact that they had not considered the effect of strange ideas, couched in a still stranger language, upon the youthful mind. But the particular matter with which they had to deal that morning was not so much the physical health of the children who came to the schools or the mode in which the laws of health could be imparted to teachers and to children, as the importance of school buildings and school apparatus in continuing and promoting the health of the scholar. They were fortunate in their anticipation of hearing the views of Sir Aston Webb, and the discussion which would follow his address. He trusted, however, that the discussion would deal not only with the ideal, but with the practical, that they would hear not only what school buildings ought to be, but what, under the present conditions, financial and other, they could be made by the local authorities and public bodies who undertook their construction. He knew that the building rules of the Board of Education were likely to come in for criticism there and elsewhere; but he would say this in defence of them, that while some people would say that they were not sufficiently ideal and did not attain to the high standard of their endeavour, and while others would say that they were not sufficiently practical, and suggested requirements to which the finance of local authorities would not adapt itself, the Board had endeavoured to make them workable rules. They would hope, from the discussion there and elsewhere, and by the criticism and experience of others, how those rules might be modelled in the future, and from time to time adapted to the existing possibilities and requirements. He felt strongly, and he believed the rest of his Department felt with him, that the Board of Education could not do too much in the way of endeavouring to compare notes with, and acquire information from, all those who were interested in and taking part in the work of education, because it was only by this constant endeavour to inform themselves of the wants and capacities of those with whom they had to do that they would be able to lay down rules for, and to offer advice and give assistance to, local authorities, upon whom was laid the great and responsible burden of superintending the education of the country.

Sir Aston Webb then opened the discussion on schools and their equipment. His two great desiderata were—sun on all the rooms, and free circulation of air round all the buildings. The time would soon come, if it had not already arrived, when it would be thought as impossible to build a school round a cloistered quadrangle as a few years ago it was thought impossible to do anything else.

Mr. J. Osborne Smith complained that it was ordained by the Education Department that the children in the elementary schools might have only a trifle more than half the floor space and air space given to children of similar age in the secondary schools. Probably the backward condition of " non-provided " school buildings was due in great measure to the fact that structural and sanitary reports had been made to the Education Department by inspectors appointed to examine the children, and not by persons skilled in designing and constructing school buildings.

Mr. J. Graham, Inspector of Schools of West Riding County Council, contributed a paper discussing hygienic school furniture, and Mr. J. R. Kaye, Medical Officer to the same body, dealt with school books from the hygienic point of view.

IV.—SANITARY INSPECTION.

In the discussion of this subject the following resolution stood on the paper, and was held as under discussion by readers of papers and speakers :—

" That all private houses and other similar premises used as day and boarding schools and conducted by private individuals should be placed under the control of the sanitary authority, who should be empowered to prescribe from time to time the number of children permitted to occupy the various rooms used as class-rooms; and in the case of boarding schools the number of children permitted to occupy each dormitory or bedroom, and that the Council of the Royal Sanitary Institute be requested to bring this resolution under the notice of the proper authorities."

Dr. J. F. Sykes, President of the Society of Medical Officers of Health, who opened the discussion, proposed to leave out the words in the resolution which appeared to limit its application to private schools. All children were part of the community, for whose health the Medical Officer of Health was responsible. He urged that there should be a medical adviser at the Board of Education, to whom reports on the medical aspects of the Education Acts should be referred, and that Medical Officers of Health should be enlisted in the service of the Department.

Dr. Sykes detailed eight resolutions passed by the Society of Medical Officers of Health in 1902.

1. That school teachers should be instructed to notify to the Medical Officer of Health the occurrence of cases of alleged or of suspected infectious disease, and to furnish such other information as may be reasonably required by a sanitary authority. That it should further be obligatory on school teachers to carry out the requirements of the Medical Officer of Health as to the exclusion of suspected cases of infectious illness, subject to an appeal to the Board of Education.

2. That the Medical Officer of Health, or a medical practitioner acting under him, should be given power of entry to examine scholars on the same lines as laid down by the Eccles Corporation Act. (This applies primarily to examination for the purpose of discovering infectious and other communicable diseases, that is, health inspection, but also extends to examination of the condition of the organs of sense and of the physique, that is, physical inspection.)

3. That the hygienic control of public elementary and of other public schools should devolve on the Medical Officer of Health of the district. (This is intended to embrace both hygienic inspection and sanitary inspection.)

4. That the standard of cubic space in all schools should be raised to the maximum at present existing.

5. That a standard of purity of air in schools would be of great assistance.

6. That schools claiming grants should be required to produce a detailed report from the Medical Officer of Health as to their sanitary condition on a form to be approved, showing that they are in a sanitary condition. (This is intended to embrace both hygienic and sanitary conditions.)

7. That the Medical Officer of Health should be required to record the action taken by his department in regard to schools, and to forward annually to the Board of Education such portions of his report as relate to this subject.

8. That the Board of Education should secure a skilled medical adviser to co-ordinate the sanitary regulations of schools, and to organize a code of preventive measures applicable to schools.

The amendment was seconded by Dr. Groves, Medical Officer of Health, Isle of Wight, and supported by Dr. Collingridge (City of London), who held that all buildings should be under the inspection of Medical Officers of Health.

Dr. Richards (of Croydon) read a paper on the inspection of schools. He said that the necessity for the inspection of schools requires emphasizing on account of the fact that while workshops, factories, common lodging-houses, and many other buildings are by statute subject to inspection, no one in particular is directly responsible for the sanitary condition of schools.

The Board of Education certainly takes very little interest in the matter. Indeed, he had heard it stated that they neither assume or desire to assume any responsibility for the sanitary condition of school buildings or the health of the children. Nor is that to be wondered at when one recalls the fact that the English Board of Education, though responsible for the compulsory attendance at school of some six million children, is absolutely without expert assistance where problems of health and sanitation are concerned. They appeared indeed to resemble a certain country parson, who, when advised to have the vicarage drains and water supply examined, preferred "to leave all these matters to Providence," and hope for the best.

He went on to say that two main problems have to be solved: (1) Who should make the necessary inspections? (2) To what matters should the inspector especially devote his attention?

With regard to the first problem, it is essential that the officer appointed should be a medical man, with expert knowledge of sanitation and a general knowledge of the routine of school life. In most instances the Medical Officer of the authority which is responsible for the schools will naturally be selected, and there is every advantage in avoiding even the semblance of dual control. In large towns this will often entail the provision of skilled assistance, and in administrative counties some of the work will have to be delegated to the local Medical Officer of Health, but there is every advantage in the County Medical Officer of Health having the oversight of those schools which are not controlled by local educational committees.

The duties of the inspector. These are obviously two-fold. In the first place he should point out to the head teachers how to make the best use of the material at their disposal, and in the next place report at stated intervals to his authority. Not only should the means of ventilation be described, but the use which the teachers make of those means, and the ways in which ventilation might be improved either by new fittings or by more intelligent use of those at present available.

He concluded by detailing matters in schools requiring to be dealt with on a sanitary inspection.

Ultimately neither resolution nor amendment were carried, but the matter was referred to the Council of the Institute.

V.—TRAINING OF TEACHERS.

Sir William Collins, Chairman of the Education Committee of the London County Council, occupied the chair during the discussion on this subject. He rejoiced to think that it was now possible to combine in the interests alike of teachers and of taught the benefits of municipalization with those of education and also of sanitation, in which the whole body politic was so deeply interested.

Lady Londonderry was glad the training of teachers was the subject of discussion. Of two schools of thought on this problem, one insisted that all schools should have specialist instructors for the domestic economy subjects and for hygiene, so as to ensure their being scientifically taught in a way that was almost certainly beyond the ordinary teacher; the other considered it so vitally important to have those domestic subjects regarded by children and teachers as essential elements in the ordinary curriculum that they preferred them to be taught by the ordinary teacher, even at a lower level of knowledge, than to have it appear by the employment of a specialist teacher that these subjects were divorced from the ordinary life and teaching of the school. There was much to be said for this second point of view. It was an extraordinary thing that the training colleges for teachers in this country, which had been supported at vast expenditure of public funds for fifty years, should have for the most part failed to give any courses in practical subjects of domestic economy except needlework, which had probably been largely overdone. In such training-schools for domestic subjects as did exist there had been a tendency to soar into high theory instead of making sure that skill was acquired in the actual practice of the simple processes. It was essential that the children should, on completing their course, be able actually to do effectively the duties of the home, and not merely be able to use learned phrases about albuminoids, bone-forming elements, and so forth.

Papers were then read in which Professor C. S. Sherrington discussed a course of training for teachers in hygiene. Professor Henry Kenwood said it was only the simple and essential laws of health that need be taught, and that any scheme that aimed at more than this would fail to realize the best results; he thought that although it might be feasible for the teachers to be taught hygiene by a medical man, yet the children could only be taught by the teachers; the teaching of children was a faculty which could only be acquired by those who had made a special study of the art.

In the course of the discussion special interest was manifested in an address read by a Japanese lady, Miss Miyakama. She said Japan was far behind in sanitation, and had no proper drainage system at all. She had no right, therefore, to say anything about hygiene; but Japan was a poor country, and had some customs, knowledge of which might be found useful in the poorer quarters in England. Among these was the custom of hot bathing. She had been astonished to find in the Liverpool truant schools hot water baths, in which some twenty boys were allowed to wash as well as to bathe before the water was changed. On visiting the girls' bath she found the water there also very black. Baths on the Japanese system would be found more economical, cleaner, and warmer. A public hot bath in England on proper principles would cost about ninepence a day. In Japan it cost about two farthings; a baby's bath one farthing. Describing the system in detail, she stated that no one was allowed to enter the hot water bath before washing. She also stated that Japanese women would consider it a shame to send their dresses to a dressmaker. They made them at home, had a dress for each season, and at the end of every season unpicked them, washed them, and re-made them.

VI.—TRAINING OF SCHOLARS.

The Bishop of Hereford presided at the afternoon sitting, when the training of scholars was the special subject. He thanked the Royal Sanitary Institute for calling the conference, and the medical profession for the many indications they had lately given of their desire to act publicly and in combination more than hitherto in the instruction of the public. He knew of nothing of more practical interest and benefit to all those who had been working for the health of the people through temperance, than the declaration of nearly 15,000 doctors last summer. The country was now realizing the waste of its resources through letting elementary education stop at the age of twelve or thirteen, and through comparative neglect of the conditions of health. As an old schoolmaster, he said the thing that counted as one of the first and highest importance after good sanitary arrangements was the personality of the teacher. It was the teachers they had to instruct and inspire.

An interesting discussion on the training of scholars followed, on the initiation of Professor Findlay; he thought that hygienic habits had to be formed, and the field for hygienic exercise was to be found in the life of the school. These views met with wide acceptance in the course of the discussion.

An exhibition of sanitary fittings for schools and hygienic school furniture was held in connection with the Conference.

E. H. SNELL, M.D., Lond.,
Medical Officer of Health.

February 21st, 1905.

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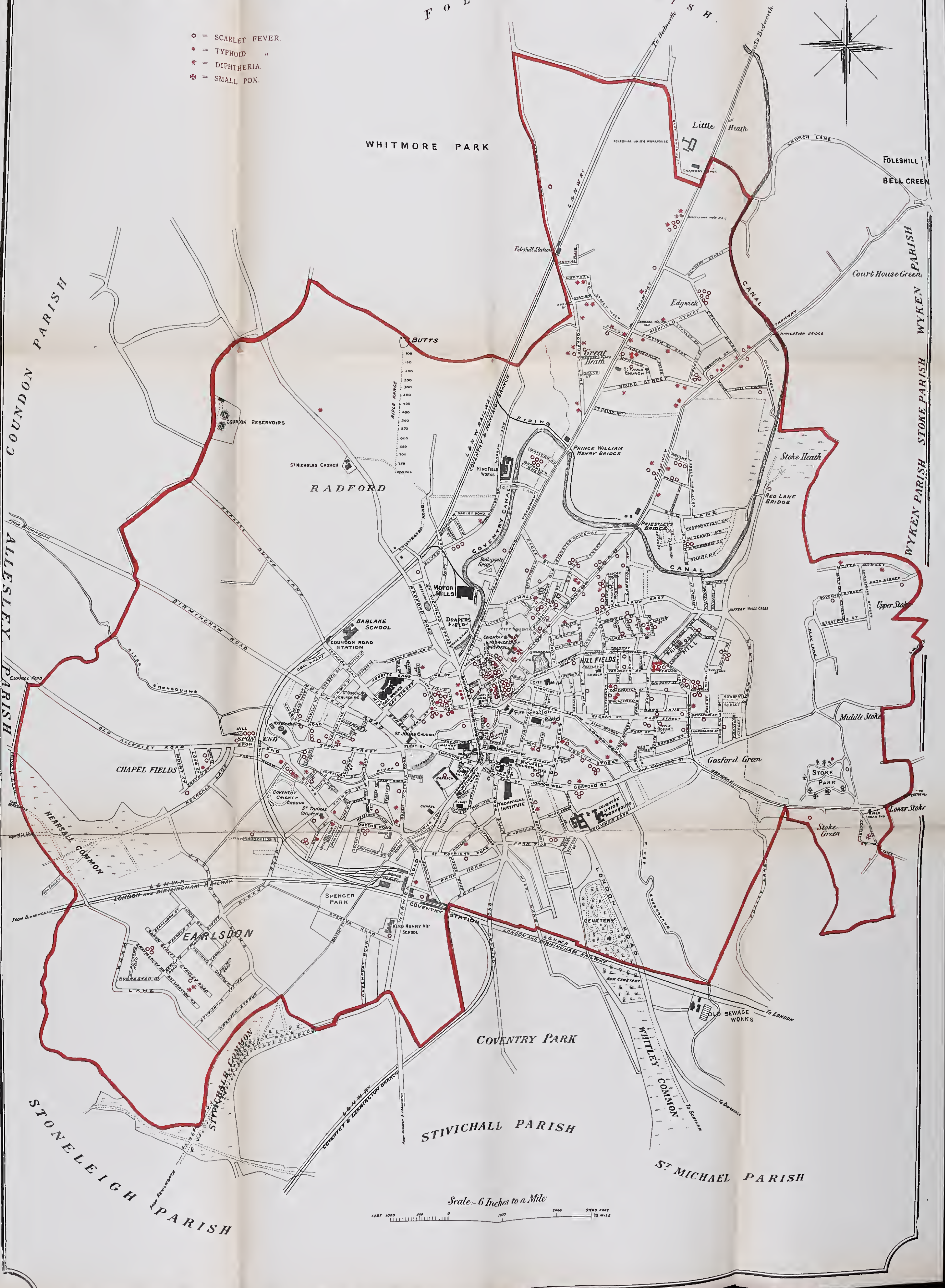
CITY OF COVENTRY
DISTRIBUTION OF
CASES of INFECTIOUS DISEASE, 1904.



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